

सं.
भारत सरकार
भारत मौसम विज्ञान विभाग
मौसम विज्ञान के महानिदेशक का कार्यालय
मौसम भवन, लोदी रोड़
नई दिल्ली – 110003 (भारत)



No. DGM-HQ-13012(26)/3/2022-E-II DGM (E-16425)

GOVERNMENT OF INDIA
INDIA METEOROLOGICAL DEPARTMENT
OFFICE OF THE
DIRECTOR GENERAL OF METEOROLOGY
MAUSAM BHAVAN, LODI ROAD
NEW DELHI-110003 (INDIA)
Email: imd.dgmrc@gmail.com

Tel. : 011-24344332

Dated: 08/10/2025

NOTICE

It has been decided to conduct the Document Verification (DV) of candidates nominated for appointment to the post of Stenographer Grade-II on the basis of Stenographer Grade 'C' & 'D' Examination, 2024.

- The document verification will be conducted at **IMD (HQ)** during the period **21.10.2025 to 22.10.2025** for the following candidates. Candidates are requested to report at 10:00 A.M.

S. NO.	NAME	ROLL NO.
1	VIVEK DHOULAKHANDI	2201015687
2	SANCHITA	2201004814
3	MAYANK SRIVASTAVA	3205005500
4	GARVITA	2201015687

- The Attestation forms (Annexure A to F) & Check list is available on https://internal.imd.gov.in/pages/recruits_mausam.php.
- All candidates are required to appear before the Civil Surgeon/Principal Medical Officer/Chief Medical Officer in Delhi or in the District where the candidates are presently residing/belong for medical examination to determine their fitness for the Government service. Candidates are required to give a statement and declaration regarding his/her health in the attached form in the presence of Medical Officer. The medical certificate of fitness should be in the prescribed format, a specimen of which is attached. *The authorities concerned are also requested to take up the Medical Examination of the candidates concerned on the strength of this letter and issue the Medical Certificate in original to the candidate.*

- 4.1. In case any other authority letter is required by the office of medical authority concerned, the undersigned may be contact through mail at imd.dgmrc@gmail.com.
- 4.2. However, if the candidate is already in Government service, instead of obtaining a fresh medical report, they may produce this letter to their Controlling Authority to enable them to forward an attested copy of their medical examination report (with latest attested photograph) obtained at the time of appointment, to the undersigned. The candidates must ensure that the said medical examination report furnished to the previous employer should have been issued by Civil Surgeon/ Chief Medical Officer or equivalent.
- 4.3. Candidates are required to submit medical report at the time of document verification.
5. Candidates must also bring the following documents (in original) for verification, and also their self-attested photocopies for submission to this department on the day of Document Verification in the following order:
 - 5.1. Attestation form (filled up with blue pen and printed on one side only with recent photograph).
 - 5.2. Matriculation Certificate and mark sheet as proof of Date of Birth.
 - 5.3. 12th Standard or equivalent examination certificate and marksheet issued by a recognised Board or University (Date of declaration of result of the qualifying examination should be on or before the cut-off date, i.e. **17.08.2024**, for the post of Steno Grade-II, and failing which the certificates will not be accepted as valid proof of possessing the requisite EQ).
 - 5.4. Candidates must produce original certificates (Year-wise mark sheet, Provisional Certificate, or Degree), providing that they met the minimum educational qualification by **17.08.2024**.
 - 5.5. Category Certificate (OBC/SC/ST/EWS) should be in the format prescribed in the Stenographer Grade 'C' & 'D' Examination, 2024 Notification issued by the competent authority. EWS certificate should be based on the income of Financial Year 2023-24 (01.04.2023 – 31.03.2024) and valid for 2024-25. It should be in conformity with **Annexure-X** of the Stenographer Grade 'C' & 'D' Examination, 2024 Notification. Similarly, crucial date for claim of OBC will be the closing date for receipt of online applications i.e. **17.08.2024 (Annexure-IX)** of the Stenographer Grade 'C' & 'D' Examination, 2024 Notification.
 - 5.6. Certificate in the format prescribed (**Annexure-XI, XII & XIII**) in the Stenographer Grade 'C' & 'D' Examination, 2024 Notification regarding category of Person with Benchmark Disability (PwBD).
 - 5.7. Certificate in the format prescribed in the Stenographer Grade 'C' & 'D' Examination, 2024 Notification (**Annexure-VI and Annexure-VII**) viz., Discharge Certificate, Service Certificate etc. in support of your claim as Ex-Serviceman.

- 5.8. Certificate in the format prescribed in the Stenographer Grade 'C' & 'D' Examination, 2024 Notification (**Annexure-V**) for seeking age relaxation as a Central Govt. Civilian employee.
- 5.9. Medical fitness certificate.
- 5.10. **The use of black ball point pen/Gel pen is strictly prohibited during Document Verification.**
6. Document Verification will start at 10.00AM and candidates should possess at least two photo-bearing identification proof and address proof such as Driving License, Voter Card, Aadhar Card, PAN Card etc.
7. No TA/DA will be paid for attending document verification.


08/10/2025

(Khushal Singh)
Administrative Officer-I
for Director General of Meteorology

CANDIDATE'S STATEMENT & DECLARATION

The candidate must make the statement below prior to his/her medical examination and must sign. The declaration appended thereto. His/ Her attention is specially directed to the warning contained in the note below:

**FRONT ATTESTED
RECENT PASSPORT SIZE
PHOTOGRAPH OF THE
APPLICANT**

1. State your name in full (in block letters)

.....

2. State your age and birth place:

.....

- (a) Do you belong to races such as Gorkhas, Garhwali's, Assamese, and Nagaland Tribe etc., whose average height is distinctly lower? Answer 'Yes or No' and if the name of the race.....

3. (a) Have you ever had small pox, intermittent or any other fever, enlargement or suppuration of glands, spitting of blood, asthma, heart disease, lungs disease, fainting attacks, rheumatic appendicitis?.....

4. When were you last vaccinated?.....

5. Have you suffered from any nervousness due to overwork?

.....
.....

6. Furnishing of the following particulars:

Father's age if living and state of health	Father's age at death and cause of death	No. of brothers living, their age and state of health	No. of brothers dead, their age at death and cause of death
Mother's age if living and state of health	mother's age at death and cause of death	No. of sisters living, their age and state of health	No. of sisters dead, their age at death and cause of death

Contd...2/-

7. Have you been examined by medical Board before.....
8. If answer to the above is yes , please state what services you were examined for :
.....
.....
9. Who was the examining authority?
.....
10. When and where was the Medical Board held:
11. Result of the Medical Board's examination, if communicated to you or if known:
.....

All the above answers are true to the best of my knowledge and belief.

Signature of Candidate.....

Signed in my presence.....

Signature of Medical Officer (with Seal)

NOTE: The Candidate will be held responsible for the accuracy of the above statement by willfully suppressing any information. She/he will incur of losing the appointment if appointed or forfeiting all claim of superannuation allowance of Gratuity.

MEDICAL CERTIFICATE OF FITNESS FOR EMPLOYMENT IN GOVERNMENT SERVICE

I hereby certify that I have examined Shri. /Smt./Miss.

a candidate for employment in the India Meteorological Department, Ministry of Earth Sciences and cannot discover that he/she has any disease (communicable or otherwise). Constitutional weakness or bodily infirmity, except

I do not consider/do not consider this a disqualification for employment in the India Meteorological Department, Ministry of Earth Sciences.

The age of Shri/Smt./Miss

according to his/her

statement is

years and by appearance is about

years.

Signature of CMO/Civil Surgeon

(With official stamp)

Date :

Signature of Applicant

**FRONT ATTESTED RECENT
PASSPORT SIZE
PHOTOGRAPH OF THE
APPLICANT**

ATTESTATION FORM

WARNING

Affix signed passport size (5
cm x 7 cm copy of recent
photograph)

1. The furnishing of false information or suppression of any factual information in the attestation form would be a disqualification, and is likely to render the candidate unfit for employment under the government.
2. If detained, arrested, prosecuted, bound down, fined, convicted, debarred, acquitted, etc. subsequent to the completion and submission of this form,, the details should be communicated immediately to the authorities to whom the attestation form has been sent earlier, failing which it will be deemed to be a suppression of factual information.
3. If the fact that false information has been furnished or that there has been suppression of any factual information in the attestation form comes to notice at any time during the service of a person, his services would be liable to be terminated.

1.	Name in full (in block capitals letters) with aliases, if any (Please indicate if you have added or dropped in any part of your name.)	SURNAME	NAME
2.	Present address in full (i.e. Village, Thana and Dist. Or House No., Lane / Street Road and Town)		
3.	(a) Home address in full (i.e. Village., Thana and Dist. Or House No., Lane / Street / Road and Town have of Dist. Headquarter.		
	(b) If originally resident of Pakistan / Bangladesh (erstwhile East Pakistan), the address in that country and the date of migration to Indian Union		
4.	Aadhar No. (if available)		
5.	PAN No. (if available)		

6.	Nationality		
7.	(a) Date of Birth (b) Present Age (c) Age at matriculation		
8.	(a) Place of Birth, Dist. and State in which situated (b) Dist. and State to which you belong (c) Dist. And State to which your Father originally belongs		
9.	(a) Your religion		
	(b) Are you a member of a Scheduled Caste/Scheduled Tribe/Other backward Classes/ EWS? Answer (Yes or No) .		
10.	Particulars of places (with period of residence) where you have resided for more than one year at a time during the preceding five years. In case of stay abroad (including Pakistan), particulars of all places where you have resided for more than one year after attaining the age of 21 years should be given.		
	From	To	Residential address in full (i.e. Village, Thana & District or House No. & Street / Road and Town Name of the District Hqtr. of the place mentioned in the preceding column

11. Relation	Name (in full & aliases, if any)	Nationality (by Birth & or by domicile)	Place of birth	Occupation (if employed give designation & official address.)	Present postal address (if dead, give last Address)	Permanent Home Address
(a) Father						
(b) Mother						
(c) Spouse						
12.	Information to be furnished with regard to sons and / or daughters in case they are studying / living in a foreign country					
Name	Nationality (By Birth and /Or by Domicile)	Place of Birth	Country in which studying / studying / living with Full Address	Date from which Studying / Living in the country mentioned in the previous column		

13.	Educational qualification showing place of education with years in schools and colleges since 15 th years of age (Starting from class-X)			
Name of School/College with Full Address		Date of Entering	Date of leaving	Examination passed
14 (a)	Are you holding or have any time held an appointment under the Central Govt. or State Govt. Or a semi-Govt or a quasi-Govt. body or an Autonomous body or a public sector undertaking, or a private firm or institution? If so, give full particulars with dates of employment up to date			
Period		Designation, emoluments & Nature of employment	Full name / address of Employer	Reasons for leaving previous service
From	To			

14(b)	If the previous employment was under the Govt. of India / State Govt./an undertaking owned or Controlled by the Govt. of India or a State Govt./ anAutonomous Body / University / Local Body: If you had left service on giving one month's notice under Rule 5 of the Central Services (temporaryservice) Rules 1965 or any similar corresponding rules, were any disciplinary proceeding framed against you, or had you been called upon to explainyou conduct in any matter at the time you give notice of termination of service or at a subsequent date (s) before your service actually terminated:	
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15 (i)	(a)	Have you ever been kept under detention?	Yes/No
	(b)	Have you ever been arrested?	Yes/No
	(c)	Have you ever been prosecuted? (i.e has a charge sheet in a criminal case been filed against you in anycourt of law)	Yes/No
	(d)	Is any criminal case pending against you in any court of law at the time of filling this attestation form?	Yes/No
	(e)	Have you ever been convicted by a Court of law for any offence?	Yes/No
	(f)	Whether discharged/expelled/withdrawn from any training institution under the Govt. Or otherwise?	Yes/No
	(g)	Have you ever been rusticated by any University or any othereducational authority / institution?	Yes/No
	(h)	Have you ever been debarred / disqualified by any Public ServiceCommission from appearing at its examination / selection?	Yes/No
15(ii)	If the answer to any of the above mentioned question is "Yes", give full particulars of the case / arrest / detention / fine / conviction/sentence/punishment etc. and /or the nature of the case pending in the Court / University / Educational Authority etc. at the time of filling up thisAttestation Form.		

Notes: (i) Please also see the “Warning” at the top of this Attestation Form. (ii) Specific answers to each of the questions should be given by striking out “Yes” or “No” as the case may be		
16.	Name of two responsible persons of your locality or two references to whom you are known (Name, address and mobile No.)	1. 2.

DECLARATION

I certify that the foregoing information is correct and complete to the best of my knowledge and belief.

I am fully aware that by providing false information or suppressing material information while filling this form, the authorities have full right to terminate my appointment letter and I am also liable for appropriate criminal/civil/legal action as a consequence.

I am not aware of any circumstances which might impair my fitness for employment under Government.

Signature of candidate:

Date:

Place:

TO BE FILLED BY OFFICE

(i). Name, Designation and Full Address of the appointment authority:

(ii). Post for which the candidate is being considered.:

CHARACTER CERTIFICATE

Certified that I have known Shri/Smt./Kum. _____
 _____son/wife/daughter of Shri _____
 _____for the last* _____years _____

months and that to the best of my knowledge and belief he/she bears a reputable character and has no antecedents which render him/her unsuitable for Government Employment.

2. Shri/Smt./Kum. _____ is not related to me.

Place : _____

Signature

Date : _____

Designation _____

 * (To be attested by stipendary I Class Magistrate/District Magistrate or Sub-Divisional Magistrate).

ATTESTED

Place:

Date:

Signature

Designation

(Attesting Authority)

(This should be done after the candidate has been finally selected)

DISCHARGE CERTIFICATE

No.....

Place

Date

Shri/Smt/Kumari
has been working as In the Ministry/Department of
.....from.....to.....
.....He/She was drawing Rsas pay with/without allowance and his/her
services have been or are likely to be terminated with effect from on
account of reduction in establishment.

His/Her work and conduct were satisfactory.

Signature.....

(Designation of Officer and office seal)

MARITAL STATUS DECLARATION FORM

I, Shri/Smt/Kumari _____ declares as under:

- i) That I am unmarried/a widower/ a widow
- ii) That I am married and have only one spouse living
- iii) That I have entered into or contracted a marriage with a person having a spouse living.
Application for grant of exemption is enclosed.
- iv) That I have entered into and contracted a marriage with another person during the life time of my declaration being found to be incorrect after my appointment, I shall be liable to be dismissed from service.

2. I solemnly affirm that the above declaration is true and I understand that in the event of the declaration being found to be incorrect after my appointment, I shall be liable to be dismissed from service.

DATE

SIGNATURE

* Please delete clause/clauses not applicable.

FORM TO BE FILLED BY GOVERNMENT EMPLOYEES ON FIRST APPOINTMENT

1. Close relation who are Indian National domiciled in other countries:

S.No.	Relation	Name	Nationality	Present Address	Place of birth	occupation
1.	Father					
2.	Mother					
3.	Wife/Husband					
4.	Son(s)					
5.	Brother(s)					
6.	Sister(s)					

2. Close relations resident in India who are non-Indian:

S.NO.	Relation	Name	Nationality	Present Address	Place of birth	Occupation
1.	Father					
2.	Mother					
3.	Wife/Husband					
4.	Son(s)					
5.	Brother(s)					
6.	Sister(s)					

If in public service, give all particulars regarding designation of the post held, name of department/office etc. where employed and the date of such employment.

I certify that the foregoing information is correct and complete to the best of my knowledge.

Signature:

Name:

Designation:

Date:

- NOTE:** 1. Suppression of information in this form will be considered a major departmental offence for which the punishment may extend to dismissal from service.
2. Subsequent changes, if any in the above data should be reported to the head of the office/department at the end of each year.

UNDERTAKING

I understand that my appointment to the post of _____ is purely provisional pending the issue of a certificate of eligibility in my favour after necessary verification of my antecedents and that in the event of such certificate being refused, my appointment shall stand cancelled.

I agree to serve anywhere in India or abroad where the India meteorological Department has or may establish an office or observatory according to the exigencies of service.

I am not serving or under obligation to serve another Central Government Department, a State Government or a Public Authority.

Signature of the candidate

Place:-

Dated:-

FORM-1

To

The Director General of Meteorology, India
Meteorological Department, Mausam Bhavan,
Lodi Road, New Delhi-110003.

Sub: Acceptance of the Offer of Appointment to the post of _____
in India Meteorological Department.

Ref. :

Sir,

I, hereby, accept the Offer of Appointment to the post of _____ in India Meteorological Department as per terms and conditions laid down in the above mentioned offer of Appointment Memorandum.

Duly filled up annexure A to F is enclosed herewith, self attested copies of degree/ diploma certificate, Date of Birth and three copies of passport size photograph duly attested is enclosed herewith.

I am willing to join immediately/at _____ days prior notice (strike out which is not applicable).

Thanking You,

Yours faithfully,

Dated :

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