

Detailed Proforma to be filled by the candidates only for Special weightage excluding Female weightage

Registration No: _____

Roll No: _____

Name of the Post: _____

Name of the Official:- _____

Special weightage (if applicable) :-

Sr no.	Major Factor	Sub-factor	Max. Points	Explanation	Yes/No	If yes(please attach proof as per explanation)
1	Special Category female ABRCs/BRPs	Widow/divorcee woman/Legally separated woman	10	All female of this category shall be given maximum 10 marks only. She will submit the legal proof regarding claim of sub-factor .		
2	Differently abled persons	Vision	20	40% to 60% disability = 10 Marks.		
		Locomotors	20	Above 60% to 80% = 15 Marks		
		Deaf & Dumb	20	Above 80%=20 Marks Valid certificate issued during last one year by AIIMS (Including its branches in Haryana), PGI Rohtak, PGI, Khanpur Kalan, Kalpana Chawla Medical College, Karnal, PGI Chandigarh or Duly Constituted Medical Board only		
3	Couple case	Only female spouse	5	Employees' spouses working in state govt./ center Govt as regular government employee or working on contract basis under Haryana School shiksha Pariyojna Parishad, Panchkula excluding out sourced officials. Such proof should be issued currently by DDO(Drawing Disbursing Authority/ Head of the Department)		

Declaration:-

I certify that the above stated information given by me is correct, complete and true to the best of my knowledge and belief that no material information has been concealed. If after allocation of stations , it is found/ comes to the notice of HSSPP that I have taken advantage of criteria to get the suitable station, disciplinary action may be initiated against me and may be posted to any other vacant station in Haryana.

Date:

Place:

Signature of Candidate

Office Remarks of verification committee at District level (Details of weightage marks):

Note:- Each Female official is entitled for 5 marks and max. points will not exceed to 20 marks in each case i.e male/female.

Sr no.	Major Factor	Sub-factor	Max. Points
1			
2			
3			
4			

Special Remarks, if any:- _____

Signature of Committee Member(1)

Signature of Committee Member(2)

Signature of Committee Member(3)

Office Remarks of re-verification committee (Details of weightage marks):

Sr no.	Major Factor	Sub-factor	Max. Points
1			
2			
3			
4			

Signature of Committee Member(1)

Signature of Committee Member(2)

Signature of Committee Member(3)

Signature of Committee Member(4)

Signature of Committee Member(5)