

No.25/17/2017-ADMIN-I-Part(1)

भारत सरकार/ Government of India

नवीन एवं नवीकरणीय ऊर्जा मंत्रालय/ Ministry of New & Renewable Energy

Atal Akshay Urja Bhawan, Opposite CGO Complex,

Lodhi Road, New Delhi - 110003

Dated 26th August, 2022

NOTICE

Subject: Appointment on Compassionate Ground in Ministry of New & Renewable Energy – Reg.

As per the current vacancy for appointment on compassionate ground, the Ministry of New & Renewable Energy, is considering the applications from dependent family members of a Government servant deceased while in service or who retired on medical grounds, from the Ministry.

2. It is this aspect, which is foremost and hence while considering a request for appointment on compassionate grounds by a Committee, a balanced and objective assessment of the financial condition of the family has to be made taking into consideration its assets & liabilities and all other relevant factors such as the presence of earning member(s), size of family, age of the children and the essential needs of the family etc.

3. Therefore, applicants from dependent family members of Government servant deceased while in service or who retired on medical grounds, are requested to submit the following documents (self-attested copies) alongwith the format prescribed (Annexure) for seeking Compassionate appointment:

- i. Death Certificate of the deceased government servant of this Ministry.
- ii. PPO copy
- iii. Proof/ documents related to relation of the applicant with deceased Government servant.
- iv. Proof/ documents related to Date of Birth in respect of the applicant
- v. Proof/ documents related to Educational qualification in respect of the applicant
- vi. Proof/ documents related to Movable, Immovable properties & annual income earned therefrom by the family.
- vii. Proof/ documents related to annual income of family excluding income from Movable & Immovable properties.
- viii. Proof/ documents related to present as well as permanent address of correspondence.
- ix. Consent letter from the other dependent family members of deceased Government servant (copy enclosed).
- x. Undertaking regarding marital status in respect of applicant (copy enclosed).
- xi. A copy of PAN cards of all the dependents of the deceased government servant.
- xii. A copy of Aadhaar cards of all the dependents of the deceased government servant.
- xiii. Affidavit – duly filled in and signed by Magistrate/Notary Public (copy enclosed).

4. The cases already considered by this Ministry for compassionate appointment as per the previous practices will not be opened.



(Yoginder Singh)
Under Secretary to the Govt. of India

To,

IT Cell / NIC Cell to upload the same on the website of MNRE.

PROFORMA REGARDING EMPLOYMENT OF DEPENDENTS OF GOVERNMENT SERVANTS DYING WHILE IN
SERVICE/RETIRED ON INVALID PENSION

ANNEXURE

PART-A

- I. (a) Name of the Government servant (Deceased/retired on medical ground)
- (b) Designation of the Government Servant
- (c) Whether it is MTS(erstwhile Group 'D') or not?
- (d) Date of Birth of the Government Servant
- (e) Date of death/retirement on medical grounds
- (f) Total length of Service rendered
- (g) Whether permanent or temporary
- (h) Whether belonging to SC/ST/OBC
- II. (a) Name of the candidate for appointment
- (b) His/Her relationship with the Government Servant
- (c) Date of Birth
- (d) Educational Qualifications
- (e) Whether any other dependent family member has been appointed on
Compassionate grounds
- III. Particulars of total assets left including amount of
- (a) Family Pension
- (b) D.C.R. Gratuity
- (c) G.P.F. Balance
- (d) Life Insurance Policies (including Postal Life Insurance)
- (e) Moveable and Immovable properties & annual income earned therefrom
by the family.
- (f) C.G.E. Insurance amount
- (g) Encashment of leave
- (h) Any other assets
- Total
- IV. Brief particular of liabilities, if any.
- V. Particulars of all dependent family members of the Government servant (if
Some are employed, their income and whether they are living together or separately

S.No.	Name(s)	Relationship with Govt. servant	Age	Address	Employed or not if employed particulars of employment and emoluments)
1					
2					
3					

VI. Declaration/Undertaking

- I hereby declare that the facts given by me above are, to the best of my knowledge, correct. If any of the facts herein mentioned are found to be incorrect or false at a future date, my services may be terminated.
- I hereby also declare that I shall maintain properly the other family members who were dependent on the Government servant/Member of the Armed Forces mentioned against 1(a) of Part-A of this form and in case it is proved at any time that the said family members are being neglected or not being properly maintained by me, my appointment may be terminated.

Date:

Signature of the Candidate

Name.....

Address.....

Mobile No.....

Email ID.....

UNDERTAKING

I, Shri/Smt..... son/daughter/wife of Late
Shri/Smt..... resident of
..... (full
address)

hereby undertake that:

i) I am married since (Date of marriage.....), and the names of my
spouse and children are as follows.

- a)
- b)
- c)

ii) I am unmarried.

** Please strike off either (i) or (ii) whichever is not applicable.

Place.....

Signature.....

Date.....

Name.....

Consent letter from the other dependent family members
Of Late Shri/Smt
Designation:

Subject: Application for appointment under the Compassionate category.

Reference: Application dated _____ from _____.

Shri _____, Son/Daughter/Wife of
Late Shri/Smt. _____ (deceased Govt. servant)
has applied for grant of appointment on compassionate grounds to the dependent family
members of the Government servant dying in harness.

2. We, the other dependent family members of the deceased Government servant Shri/
Smt. _____, have no objection if the said appointment is given to the
applicant Shri _____ and hereby give our consent for the same.

**Name, address and dated signatures of all the adult dependent family members of the
deceased Govt. servant (other than the applicant)**

- (1)
- (2)
- (3)
- (4)

Affidavit

I, _____, son/daughter/widow of Shri/ Smt. _____
 (deceased Govt. servant), Resident of _____
 have made an application for grant of appointment on compassionate grounds to a dependent family member of Govt. servant (dying in harness) or who is retired on medical grounds, vide my application dated _____.

I hereby solemnly affirm and declare as follows:

1. That, I am one of the dependent family member of the deceased Govt. servant Shri/ Smt. _____ and other adult dependent family members, whose details are given below have given consent that I may be considered for grant of appointment under compassionate category.
2. That, the details of all the dependent family members of the deceased Govt. servant Shri/ Smt. _____ are as follows (including the applicant):
 (Note: In case of married dependent daughters is such applicant, details of marital family i.e. husband/children along with present address/occupation should also be provided).

S. No.	Name & address of the dependent family member	Relationship with deceased	Sex	Date of birth/age	Marital Status	Whether employed, if yes, the details, whether in Govt./ Semi Govt./ Pvt./ Regular/ Temporary/ Daily Wages	Monthly income/ earning from all sources including employment, business, rental income etc.
1							
2							
3							
4							
5							
6							
7							
8							
9							
	Total monthly income of the family (including applicant)						

3. I also hereby declare that out of the dependent family members stated in para 2 above, following are the unmarried daughters of the deceased Govt. servant Shri/ Smt. _____:

Sl. No.	Name	Date of birth/ age	Educational Qualification	Occupation
1.				
2.				
3.				
4.				
5.				

4. That, the details of movable/ immovable property, either in the name of deceased Govt. servant Shri/ Smt. _____ or myself or any other dependent family member of the deceased are as follows:

- (i) No. of 2-wheeler vehicles (Scooter/ Motorcycle etc.) :
- (ii) No. of 4-wheeler vehicles (car/ jeep etc.) :
- (iii) Details of the residential property:

Location & details	Plot area (in sq.ft)	Built up area (in sq.ft.)	Whether used for self occupation or rented out	If rented out, the monthly rental income

(iv) Agricultural land:

Location & details	Area (in acres)	Monthly income, if any, from agricultural land

(v) Commercial property:

Location & details	Area (in sq. ft)	Monthly income from commercial property, if any

5. That, the following are the details of liabilities in the name of deceased Govt. servant Shri/ Smt. _____ and/ or dependent members of the deceased Govt. servant (bank loans/Govt. loan/ loans from other reputed lending agencies to be given, but

excluding private/ family loans which are non-verifiable, as on the date of death of Govt. servant):

S.No.	Nature of loan	Amount (as on date of death of deceased)	Copies of documents enclosed in support of claim
(i)	Bank loans payable		
(ii)	Govt. loans payable		
(iii)	Loans from other lending agencies payable		
(iv)	Other tangible liabilities verifiable as per documents / specify)		
	Total		

(Please enclose relevant documents/ certificates from the banks/ lending institutions.)

6. I hereby also declare and undertake that on getting appointment under the compassionate category, I will support the other dependents/ family members of the deceased Shri/ Smt. _____, including minor children and unmarried daughters.

(Applicant)
Deponent

Verification: Verified at Delhi, this _____ day _____ that the contents of the Affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

(Applicant)
Deponent