

Notice

It is for information of all concerned that, the candidates allotted by IBPS to Assam Gramin Bank under CRP RRBs XIV Reserve List-II for the posts of Officer Scale-I are to undergo Photo, Iris, Medical & Document verification/ Pre Joining formalities on **22-09-2026** at **Assam Gramin Bank Training & Knowledge Management Centre, Rajgargh Road, Chandmari, Guwahati-781003** as per time schedule mentioned in **Annexure-A**.

Candidates will have to get themselves duly examined by **Apollo Medical Centre, Subham Building, Block-H, adjacent to NEEPCO building, R.G. Baruah Road, Guwahati** by 21-09-2026 (Medical Certificate format is enclosed as Annexure-B), the cost of which is to be borne by the candidate concerned.

Post	Activity	Venue	Date
Officer Scale I &	Medical Check up	Apollo Medical Centre	By 21-09-2026
	Pre joining formalities/ Execution of Bond	Assam Gramin Bank Training & Knowledge Management Centre	On 22-09-2026

Please note that the offer of appointment shall be issued upon successful completion of pre-joining formalities only.

It may please be noted that candidates should come well prepared on the day of Photo, Iris & Document verification/Pre-Joining formalities with the following documents/certificates in original along with the self-attested photocopies of the same:

1. Print-out of the original e-mail / notice sent by IBPS, Mumbai intimating about one's allotment to Assam Gramin Bank for offer of appointment in the post concerned.
2. Print-out of Bank's e-mail intimating the candidate.
3. Print-out of the filled-in application form with photograph, duly signed.
4. Secondary School Certificate/School leaving certificate for proof of age.
5. Mark sheet (Year/Semester wise) showing specifically the subjects studied including the local language of the state and Certificates in support of educational qualification viz. SSC/HSC/Graduation/Post graduation/ Professional/Research qualification/Experience etc.
6. Caste certificate from the Competent Authority in prescribed format in case of candidates belonging to SC/ST/OBC (Non-Creamy Layer)/EWS. The caste/tribe, for which reservation is claimed, must be in the list of scheduled caste/tribe, OBC, as notified by Government.
7. Certificate of Disability issued in the prescribed format by the Medical Board of at least three doctors constituted by the Government clearly specifying the category and degree of disability, in case of differently-abled persons.
8. Discharge Certificate/Proforma-A for Released/Retired Personnel as per format of IBPS, in case of candidates serving in the Defense Services.
9. Photo Identity proof and Address proof.
10. Police verification report for place of domicile and criminal record (within 3 months of joining).
11. Unconditional and satisfactory discharge/release certificate from present employer, in case of candidates already employed. No lien or quasi-lien service will be accepted.
12. Five copies (four passport size and one postcard size) of color photograph similar to that submitted at the time of CRP RRBs XIV, signed on the back by a ball pen and name written thereon.
13. Any other relevant document.
14. Candidates may also approach Apollo Medical Centre Authority for earlier medical health checkup as per convenience of Apollo Medical Centre Authority (**contact details 7577005558 / 9706926298**).

Other document to be submitted:

1. The candidates are required to execute an Indemnity Bond on a non-judicial stamp paper of Rs.1000/- only for continuing of minimum of three years of service, failing which an amount of Rs.1,50,000.00 (Rupees one lakh fifty thousand) with interest equivalent to Bank's prevailing MCLR, from the date of breach of the conditions of agreement till payment must be made, apart from giving the employer Bank a three months/one month" notice (as per Service Regulations of the Bank) intimating his/her intention to resign from the service of the Bank. **For this purpose, one "Surety" (preferably natural guardian) must accompany the candidate for signing and execution of the bond on the day of pre joining formalities along with KYC documents of the "Surety" in original and photocopy as well.** All candidates should come with the indemnity bond duly typed in stamp paper which will be executed on above date. **Non judicial stamp paper of the state of Assam, without notarized and purchased in the name of the candidate (1st party and Bank as 2nd party) will only be acceptable**

2. All other formats (a) Declaration of Fidelity and Secrecy, (b) Declaration of Marital status (c) Declaration of Domicile (d) Declaration in respect of Service Regulations (e) Format of Bio-data, (f) Application for Digital I-Card, (g) Format of Specimen signature as enclosed should be completely filled up before attending the pre joining formalities

General Manager

Date: 15-09-2026

Annexure-A

Roll nos. of candidates along with time for Document Verification on 22-09-2026	
Roll No.	Time
1284005301	11.00 AM
1294000552	
1304000744	
1284002928	
1284006412	
1284005713	
1284004997	

MEDICAL EXAMINATION REPORT
Candidate proposed to be appointed as
Officer / Office Assistant (M)

1. Name :
2. Signature of the candidate in full :
3. Date of Birth :
4. Height (with or without shoe) :

GIRTH OF CHEST

- On full expiration :
- On full inspiration :
- Weight (in Kg.) :
- Pulse (Rate, Vel. Tension) :

GENERAL CONFIRMATION

1. Vision :
 2. Teeth :
 3. Hearing :
 4. Lungs :
 5. Heart :
 6. Liver :
 7. Spleen :
 8. Tonsil :
 9. Hernia :
 10. Hydrocele :
 11. Glycosuria :
 12. Albuminuria :
- Any serious type of previous ailment :
- IDENTIFICATION MARK :

CERTIFICATE

I consider that the candidate Sri/Smt _____ is of sound health and good physique / is not suitable physically.

Place:

Date :

(Signature of the Medical Officer)

Designation:

REMARKS, IF ANY:

Regd. No.

(On Non Judicial Stamp of Rs.1000/-)

Indemnity Bond In Connection with Employment in the Bank

This deed of Indemnity is made and executed on this.....day of.....20.....at...
..... between Mr./Mrs./Ms.....S/o...
D/o/W/o a permanent resident of...
....., hereinafter referred to as the
“Employees” which expression shall include his heirs, legal representatives, successors,
executors, administrators and assigns of the FIRST PART.

AND

Mr./Mrs./Ms.....S/o D/o W/o....
..... a permanent resident of
.....hereinafter called the “Surety” which term shall include his heirs,
legal representatives, successors, executors, administrators and assigns of the SECOND
PART.

AND

Assam Gramin Bank, a body constituted under the Regional Rural Bank Act, 1976 having its
Head Office at G S Road, Christianbasti, Guwahati -781005, hereinafter referred to as the
“Employer Bank” which expression shall include its successors in business and assigns of
the THIRD PART.

WHEREAS party of the first part has been selected for appointment as Officer in the service
of the “Employer Bank”, party of the third part.

AND WHEREAS pursuant to the above selection an offer of appointment containing the terms
and conditions of the appointment has been communicated to the party of the first part vide
letter No.....dated.....

Signature of the party of the first part

Signature of the party of the second part

AND WHEREAS the party of the first part vide his letter dated has communicated his acceptance of the terms and conditions of the above appointment.

AND WHEREAS one of the terms and conditions of the appointment is that the party of the first part has to serve the party of the third part i.e. "Employer Bank" for a minimum period of three years and has to execute a bond in favour of the "Employer Bank" to that effect.

AND WHEREAS the aforesaid terms and conditions of appointment, the party of the first part hereby undertakes to serve the "Employer Bank" for a minimum period of three years.

AND WHEREAS the party of the second part has agreed to stand as surety for the due performance of the terms and conditions of this Bond / agreement by the party of the first part.

NOW THIS INDENTURE WITNESSTH That in consideration of the above the parties herein above do hereby declare, agree and covenant as follows;

1. The party of the first part further undertakes that in case he/she wishes to resign or leave the services of the "Employer Bank" before the expiry of the aforesaid period of three years, he/she has to indemnify the "Employer Bank" the expenditure incurred on his/her training etc. and pay liquidated damages of Rs.1.50 lac together with interest equivalent to Bank's existing MCLR, from the date of breach of the conditions of agreement till payment, apart from giving the employer Bank a 3 month's/1 months' notice(as applicable) intimating his/her intension to resign or leave the service of the "Employer Bank". Further, in case of any breach of notice under clause 10(1) (b) of Service Regulations, 2018 by the party of the first part, Bank has to be compensated with a sum equal to pay of the party of the first part for the period of notice required by party of the first part in addition to liquidated damages of Rs.1.50 lac.
2. If the party of the first part abandons the service of the Bank before the expiry of 3 years and does not report for duty, the "Employer Bank" before the expiry of the period of 3 years, will have a right to terminate the services of the party of the first part for such action without prejudice to the right of the party of the third part to recover the amount of liquidated damages together with interest as undertaken by the party of the first part as stated herein above of this Indemnity Bond along with the conditions specified under clause 10(1)(b) of Service Regulations, 2018.

Signature of the party of the first part

Signature of the party of the second part

3. The party of the second part has agreed to stand as surety for the due performance of the terms and conditions of this bond / agreement by the party of the first part.
4. The party of the second part further agrees / undertakes / covenants that in case of commission of breach of terms of this indemnity bond / agreement by the party of the first part, he /she shall jointly and severally pay the "Employer Bank", liquidated damages of Rs. 1.50 lac with interest thereon equivalent to Bank's MCLR along with all expenses, costs and charges from the date of breach of the terms of the bond / agreement till payment thereof.
5. The amount specified above as liquidated damages shall constitute a debt owing to the "Employer Bank" and shall be recoverable from the employee and the surety jointly or severally with interest thereon at the rate specified above from the date of breach of the terms of the bond / agreement till payment along with all expenses, costs, and charges.
6. In pursuance and consideration of the above, the party of the first part and second part and their successors jointly or severally indemnify and keep the Bank indemnified, harmless for the above amount of liquidated damages with further interest, expenses, costs and charges and the said first part and second part jointly and severally and their successors shall also indemnify the Bank the above along with damages which the Bank will incur / suffer due to nonpayment of the same / recovering the same and defending any claim or action or proceeding in this regard.
7. The aforesaid Bond shall remain in full force and effect till the liquidated damages with interest, expenses, and damages are recovered from the first part and second part and their respective successors. In case of payment of the above amount with interest, costs, charges, damages, the said written Bond shall stand cancelled and the first part and the second part and their successors will stand automatically discharged.
8. NOTWITHSTANDING anything contained in this Bond, the "Employer Bank" shall have the right to terminate the appointment / service of the party of the first part by giving him one month's notice or 1 (one) month's salary in lieu of such notice, in case of performance / conduct of the party of the first part is not found satisfactory and without any notice in case if any of the information furnished by him / her based on which the selection and appointment made is found to be incorrect or false, apart from general liability of the employee to be bound by the Assam Gramin Bank (Officers and Employees) Service Regulations, 2018.

Signature of the party of the first part

Signature of the party of the second part

This bond is made, executed and delivered on Day of 20..... at.....
..... in presence of the witnesses.

Signature of the party of the first part

Signature of the party of the second part

*Signature of the party of the third part
(Name and designation of the signatory)*

WITNESSES:

1. NAME:

S/o,D/o,W/o

ADDRESS:

Signature of the first witness

2. NAME:

S/o,D/o,W/o

ADDRESS:

Signature of the second witness

SCHEDULE – II
(See Regulation 19)
Declaration of Fidelity and Secrecy

Place:.....

Date :

I, ..., do hereby declare that I will faithfully, truly, and to the best of my skill and ability execute and perform the duties required of me as officer or employee of the Assam Gramin Bank and which properly relate the office or position held by me in the said Bank.

I further declare that I will not divulge or allow to be divulged to any person not legally entitled thereto any information relating to the affairs of the said Bank or to the affairs of any person having any dealing with the said Bank and nor will I allow any such person to inspect or have access to any books or documents or electronic records belonging to or in possession of the said Bank and relating to the business of the said Bank or the business of any person having any dealing with the said Bank.

Signed before me

Signature
Name in full:
Designation:

Signature of authorized officer of the Bank
Name in full:
Designation:

CARE: (To be on the lines of Gol Rules)

SCHEDULE - I

[See Regulation 5(4)(ii)]

DECLARATION OF MARITAL STATUS

1. I, Shri / Smt. / Kum.

Son / Daughter / Wife of.....,

declare as under:

(i) That I am unmarried / a widower / 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. I may be granted exemption on the basis of ground given below. Application for grant of exemption is enclosed.

Ground:

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

Name in full:

Designation:

SCHEDULE – III
FORM - B
Declaration of Domicile
(See Regulation (73))

Place:.....

Date :

1. I, the undersigned, having been appointed in the service of the Assam Gramin Bank hereby declare..... (Place) in District as my place of domicile.

2. * The above is my place of birth.

Or

* The above is not my place of birth. My place of birth is
(Place) in District but(Place) in
has been declared as my place of Domicile for the reasons given below:

.....
.....

Signature:

Name in full:

Designation:

Nature of appointment:

Date of appointment:

.....

* Strike out whichever is not applicable.

Declaration in respect of Service Regulations

I have received a copy of Assam Gramin Bank Officers and Employees Service Regulations, 2010 & Assam Gramin Bank Officers and Employees Service (Amendment) Regulations, 2024.

I do humbly declare that I shall faithfully abide by the said regulations.

Signature: _____

Name in full: _____

Designation: _____

Date: _____

FORMAT FOR BIO-DATA

(Position as on

1

(Fill up in Block Letter)

1. Name of the Officer / Employee :

[illegible]

2. Father's Name

[illegible]

- ### 3. Mother's Name

[illegible]

4. Date of birth (dd/mm/yyyy)

[illegible]

5. Date of joining in the Bank (dd/mm/yyyy)

[illegible]

6. Appointed in the bank as

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- ## 7. Promotion Details

Sl. No.	Designation / Scale	Promoted to Designation / Scale	Date of promotion

- 8. Category (Please tick in the appropriate box)**

GEN	OBC	SC	ST	EWS
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- ### 9. Blood group

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- ### 10. Identification Mark

1. The first step in the process of identifying a problem is to recognize that a problem exists. This involves gathering information about the situation and identifying the specific issue that needs to be addressed.

11. Contact No

[illegible]

- ## 12. E-mail Id

1. General Information: Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone: _____	2. Medical History: Current Medications: _____ Previous Surgeries: _____ Chronic Conditions: _____ Family History: _____	3. Physical Examination: Vital Signs: _____ General: _____ HEENT: _____ Chest: _____ Abdomen: _____ Extremities: _____ Neurological: _____	4. Diagnosis and Treatment: Diagnosis: _____ Treatment Plan: _____ Follow-up: _____	5. Notes: _____ _____ _____
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13. PAN No.

[illegible]

- 14. Aadhar No.**

[illegible]

15. EPF No.

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16. NPS-PRAN No.

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17. Present Address

House No. / Flat No			
Building / Landmark			
Locality			
Village / Town		Dist.	
P.O.		State	
P.S.		PIN	

18. Permanent address

House No. / Flat No			
Building / Landmark			
Locality			
Village / Town		Dist.	
P.O.		State	
P.S.		PIN	

19. Marital status

Married	Unmarried
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If married,

a) Date of marriage	
b) Name of spouse	
c) Date of birth of spouse	
d) Occupation of spouse	

20. Whether any of the family member is working in the Bank

Yes	No
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If yes,

a) Name	
b) Relationship	
c) Designation	
d) Place of posting	

21. Educational qualification

Sl. No.	Examination passed	Name of Institution / Board / University	Year of passing

22. Professional qualification

Sl. No.	Examination passed	Name of Institution / Board / University	Year of passing
1.	JAIIB		
2.	CAIIB		
3.	Others		

23. Area of specialization (banking) (if any)

Sl. No.	Particulars of specialization

24. Co-curricular activities (if any) and Details of participation at Dist. / State / National Level (if any)

(a)	
(b)	

25. Details of training attended so far (if necessary separate sheet may be enclosed)

Sl. No.	Name of the Institution	Name of the Programme	Period of training	
			From	To

26. Preferences in area of interest to work

Sl. No.	Preferences	Areas of work
1.		- Marketing, Sales & Operations - Credit & Risk Management - Human Resource Management (HRM) - Finance & Accounts - Information Technology - Law
2.		
3.		
4.		
5.		
6.		

27. Particulars of the Branch / Office where posted since joining in the Bank (if necessary separate sheet may be enclosed)

Sl. No.	Name of the Branch / office	Period of service		Posted as
		From	To	

Date: _____

Signature of Officer / Employee

Place: _____

27. Particulars of the Branch / Office where posted since joining in the Bank (if necessary separate sheet may be enclosed)

Sl. No.	Name of the Branch / office	Period of service		Posted as
		From	To	

28. Dependent list:

SL NO	NAME	RELATION	DATE OF BIRTH	AGE	OCCUPATION	MONTHLY INCOME

Date: _____

Signature of Officer / Employee

Place: _____

Information required for issue of Digital Identity Card

Recent
Photograph

Name (in block letters):

Designation:

EPF No.:

Specimen Signature:
(as recorded in Bank's
Specimen card book)

Blood Group:

DOB :

Contact No.: a) Self:

b) In case of Emergency:

E-mail ID:

Permanent Address:

Identification Mark:

FORMAT

SPECIMEN SIGNATURE CARD

Signature Serial No.....

Name:

Designation:

User Id:

Specimen Signatures:

1.

2.

3.

Date:

Attested by

Signature Serial No. will be filled up at Head Office