



केंद्रीय मृदा लवणता अनुसंधान संस्थान, करनाल
CENTRAL SOIL SALINITY RESEARCH INSTITUTE
(A Unit of Indian Council of Agril. Research)
Farm, Kachhwa Road, Karnal-132001 (Haryana) India
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F.No.2(55)/E.II-2018 11348
E Office No. 247864
Date:- 09.10.2025

CIRCULAR

In supersession to all earlier correspondence issued in this regard and in compliance to the guidelines issued by the Government of India/ Indian Council of Agricultural Research, applications are hereby invited from eligible dependent family members of employees of ICAR-CSSRI who have died in harness, retired on medical grounds or are missing, along with the attributes specified in ANNEXURE-I and ANNEXURE-II (attached).

The Applications, complete in all respect, with all required documents, should be submitted in a sealed cover to the undersigned on or before **20.11.2025 (5:30 PM)**.

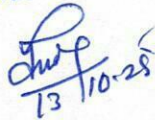
Incomplete applications or those received after the due date shall not be considered and rejected straight away with no appeal.


(Sumit Kumar Jindal)
Chief Admin Officer (Sr. Grade)

Encl: As Above

Copy to: Sh. Mehul Sharma, Technician, for placing the circular on the ICAR-CSSRI website.

Sh. Mehul Sharma for n/a.


13/10/25

APPLICATION FORM FOR APPOINTMENT ON COMPASSIONATE GROUNDS

ANNEXURE- I

Sl. No	Attribute	Value/Details (to be filled by applicant)	Certificate issued by the Undermentioned Competent Authority to be Annexed
01	Family Pension (Basic Excluding DA & Allowances)		Certificate Issued By The Institute i.e ICAR-CSSRI
02	Terminal Benefits – Lump Sum Amount Received By The Family On The Death Of Government Servant (I.E DCR Gratuity, GPF/PPF Account Balance, LIC/PLI, CGEIGS, Leave Encashment/ Lump Sum Amount Under NPS, Etc.)	DCR Gratuity	Certificate Issued By The Institute i.e ICAR-CSSRI
		GPF/PPF Account Balance	
		LIC/PLI	
		CGEIGS	
		Leave Encashment/ Lump Sum Amount Under NPS	
03	Annual Income Of Earning Members & Income From Property		<ol style="list-style-type: none"> Officer Not Below The Rank Of Tehsildar And Sub-Divisional Officer Of The Area Where The Candidate And/ Or His Family Normally Resides. Copies Of PAN Cards And ITR Of Previous Year Of Earning Members May Also Be Enclosed.
04	Movable/Immovable Property (Both) Of The Applicant And Their Family Members		<p>For Movable Property: Invoices Indicating Purchase Price And Date Must Be Submitted. For Vehicles and other items reported, a Standard Depreciation Of 10% Per Year May Be Applied.</p> <p>For Immovable Property:</p> <ol style="list-style-type: none"> Conveyance/Sale Deed etc. of the immovable property along with the current market value of the property (or circle rate etc. if any) duly certified by the revenue officials of the area.

			2. Property tax/ House Tax Receipts Of The Previous Year May Also Be Enclosed.
05	Left-Over Service Of The Deceased		Certificate Issued By The Institute i.e ICAR-CSSRI
06	Dependents – Mother Or Father, Spouse (Unemployed Only)		Certificate Issued By The Institute i.e ICAR-CSSRI
07	Unmarried Daughters		Certificate Issued By The Institute i.e ICAR-CSSRI
08	Dependent Minor Children at the time of death of the employee		Certificate Issued By The Institute i.e ICAR-CSSRI
09	Unmarried Major Son (Upto 25 Years Of Age) And Dependent Major Son i.e. Physically And Mentally Challenged, (Without An Age Limit)		1. Certificate Issued By The Institute i.e ICAR-CSSRI 2. For physically and mentally challenged son (without age limit), a disability certificate must be issued by a notified medical authority and countersigned by the Chief Medical Officer (CMO)/Medical Superintendent/ Head of Government Hospital.
10	Educational Qualifications Of The Applicant		Attested Copies Of The Educational Qualifications Of The Applicants.
11	Age Of The Applicant		1. Birth Certificate 2. 10 th Certificate 3. PAN Card
12	Any Other Information		

Thumb Impression/ Signature of the Applicant

AFFIDAVIT

**Affidavit to be given on Indian Non-Judicial Stamp Paper of Rs.100/-
and duly attested by Notary Public**

I, _____ Son/Daughter/Wife of _____ residing at
_____ do hereby solemnly affirm and declare as under:

1. That I am a citizen of India.
2. That the total annual income of earning members of my family and income from property is Rs. _____
3. That I, along with my family members, have the following movable/immovable property:
 - a. **Movable Property:** _____
 - b. **Purchase price and date of purchase of movable property:** _____
 - c. **Immovable Property:** _____
 - d. **Current market value of the immovable property:** _____
4. This affidavit is applied for submission of application for compassionate appointment.
5. That this statement is true to the best of my knowledge, and I shall remain responsible for any false statement.

Deponent

Verification:

I, the above-named deponent, do hereby solemnly affirm and declare that the contents of this affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed there from. If any of the facts mentioned are found to be incorrect or false at a future date, my services may be terminated.

Deponent