GOVERNMENT OF INDIA



MINISTRY OF RAILWAYS RAILWAY RECRUITMENT BOARD::SECUNDERABAD



CEN 01/2019(NTPC)-NOTICE REG.APPEAL FOR MEDICAL RE-EXAMINATION

No. RRB/SC/607/CEN-01/2019/1-13/Level-6/ME

Date: 20.12.2024

The Document Verification (DV) of shortlisted candidates for the posts of Station Master (i.e., Category No. 2) in Level-6 was held on 15.10.2024 followed by their medical examination at Railway Hospital. Subsequently, according to the medical reports received, **07 (Seven)** candidates, whose roll numbers are listed in **Annexure-I**, were found **unfit in A-2 (Aye-two)** but found fit in other lower Medical classifications by the various medical committees concerned.

If any such candidate(s) wishes to appeal against the decision of the medical committee concerned,he/she should <u>submit an appeal for medical re-examination addressed to the Principal Chief</u> <u>Medical Director, South Central Railway, Secunderabad latest by 19th January 2025</u> (through RRB, <u>Secunderabad</u>) at the following address by speed post or delivered by hand to:

Deputy Secretary, Railway Recruitment Board, Behind IRISET Campus, South Lallaguda, Secunderabad –500017(Telangana)

IMPORTANT:

- 1. Appeals for Medical Re-examination shall be considered only if the candidate submits a medical certificate (as per enclosed format) obtained from a Government/Private Medical Specialist doctor with Name, Signature and Seal of the Specialist of the medical cause concerned–due to which the candidate has been found unfit.
- 2. The following documents are mandatory with the appeal:
 - a) Medical Certificate (as per Annexure-A).
 - b) Proforma for Medical Re-examination Appeal (as per Annexure-B).
 - c) Demand Draft for Rs.1000/-(Rupees one thousand only) drawn in favour of PFA, South Central Railway/Secunderabad.

Date: 20.12.2024

Chairman Railway Recruitment Board, Secunderabad

WARNING: Candidates trying to use unfair or illegal means to gain appointment will be summarily disqualified permanently and charged for criminal misconduct.

(contd.)

SI. No.	Roll No.	NAME OF CANDIDATE S/Sri/Smt/Kum.	DVSI. No	MEDICAL FITNESS
1	281194260778755	RAVINDRA KUMAR	931	C1 & below
2	281194160722432	NEPAL MEHER	935	A3 & below
3	281194150958369	HEMANT KUMAR SAHU	937	C1 & below
4	281194171085750	DHEERAJ PAL	940	B1 & below
5	281194221117125	SAURABH KUMAR	941	A3 & below
6	281192261073967	SANJEET KUMAR DAS	944	C1 & below
7	281193120883724	LAVKUSH MEENA	951	A3 & below

(contd.)

Annexure-A

PROFORMA OF MEDICAL CERTIFICATE TO BE SUBMITTED ALONG WITH APPEAL FOR MED	DICAL RE-EXAMINATION
(Authority: Railway Board's letter No.2014/H/5/8 (Policy), dated: 07-07-2017)	
I HEREBY CERTIFY THAT I have checked up the under-mentioned	
Shri/Smt/Kum:	Photo attested by
	issuing authority
S/o, W/o, D/o	
5/0, w/0, D/0	
Address	

RRB Roll No.....applicant for Level– 6 of CEN 01/2019 (NTPC) under RRB Secunderabad.

The candidate has the following standard required for appointment in the Railways.

Post	Class	Standard required by Railways for the above post/level	Examination findings of the Candidate	Remarks
		1 2 3		
		5		

Identification m	arks:		
1.			
2.			

I, Dr am fully aware of the physical & visual standards set by the Railways for the particular medical category and that I am aware of the fact that the candidate has already been declared unfit according to these standards during the medical examination conducted by the appropriate Railway Medical Board comprising of three senior Railway doctors appointed by Government in this regard.

Name of the Specialist: Dr.....

MCI Registration No.....

Place..... Date.....

(Signature of the Specialist with Seal)

Annexure-B

From:	Date:
Name:	
Roll Number:	DVSL. No
Mobile Number:	
Email ID:	

To, Principal Chief Medical Director, South Central Railway, Secunderabad (Telangana)

(Through:Chairman,RRB/Secunderabad)

SUB: APPEAL FOR MEDICAL RE-EXAMINATION UNDER CEN-01/2019(NTPC)

- After my Document Verification held on....../.....at RRB,Secunderabad,I attended
 Railway Hospital for my Medical Examination
 on..../.....for
- ii) The said hospital authorities have declared me UNFIT in category. Hence I wish to appeal Against the same.

Kindly consider my appeal and do the needful.

- **Encl:** 1. Medical Certificate (Annexure-A)
 - 2. Demand Draft (as above).

(Signature of the candidate)