



**TELANGANA PUBLIC SERVICE COMMISSION: HYDERABAD**  
**ASSISTANT MOTOR VEHICLES INSPECTOR IN TRANSPORT DEPARTMENT**  
**(GENERAL RECRUITMENT)**  
**NOTIFICATION No. 31/2022, DATED: 31/12/2022**

**WEB NOTE**

The candidates who have attended for Verification of Certificates for Recruitment to post of Assistant Motor Vehicles Inspector in Transport Department, Notification No. 31/2022, dated: 31/12/2022, are informed to appear before the Medical Board at Room No. 507 in Osmania General Hospital, Hyderabad for verification of physical standards prescribed for the post which is scheduled to be held from **01/07/2024 to 08/07/2024 (Except 07/07/2024) at 08:30 AM** onwards.

The candidates are instructed to pay the Medical Examination Fee of Rs.600 in cash and bring 3 latest passport size photograph to affix on the Medical Board Proforma which is available in the Commission's Website. For the detailed schedule, please visit the Commission's website <https://www.tspsc.gov.in>.

**Place: Hyderabad**  
**Date: 28/06/2024**

**Sd/- Dr. E. Naveen Nicolas, IAS.,**  
**SECRETARY**

**TELANGANA PUBLIC SERVICE COMMISSION :: HYDERABAD**

**RECRUITMENT TO THE POST OF ASSISTANT MOTOR VEHICLES**

**INSPECTOR IN TELANGANA TRANSPORT DEPARTMENT**

**NOTIFICATION NO: 31/202022**

**NOTIFICATION ON SCHEDULE OF MEDICAL BOARD**

It is hereby informed that the candidates, whose registration Number is given below, are provisionally admitted for verification of physical standards prescribed for this post. The candidates are directed to appear before the medical board at **Room No. 507, Osmania General Hospital**, Hyderabad on the date (s) mentioned hereunder at **08.30am**.

It is further informed that mere undergoing Medical Examination cannot be constructed as selection and is subject to fulfillment of the conditions and other eligibility aspects with reference to the Commission's Notification No.31/2022,Dt:31/12/2024.

The candidates are further informed that, the request for postponement of Medical Examination will not be entertained.

**The candidates are required to pay an amount of Rs.600/- (Rupees Six hundred only) towards the Medical Board Fee to the Hospital authorities and bring 3 latest passport size photographs to affix on the Medical Board Proforma which is available at the end of this schedule.**

**Date of Medical Examination: 01/07/2024 at 8.30 AM**

|            |            |            |            |            |
|------------|------------|------------|------------|------------|
| 2311600014 | 2311700135 | 2311700295 | 2311700458 | 2311700563 |
| 2311600059 | 2311700143 | 2311700309 | 2311700497 | 2311700628 |
| 2311600101 | 2311700170 | 2311700338 | 2311700502 | 2311700633 |
| 2311600105 | 2311700199 | 2311700362 | 2311700510 | 2311700645 |
| 2311600164 | 2311700217 | 2311700384 | 2311700523 | 2311700681 |
| 2311600182 | 2311700238 | 2311700408 | 2311700531 | 2311700699 |
| 2311700043 | 2311700250 | 2311700414 | 2311700536 | 2311700708 |
| 2311700076 | 2311700272 | 2311700427 | 2311700541 | 2311700740 |
| 2311700078 | 2311700277 | 2311700440 | 2311700546 | 2311700760 |
| 2311700105 | 2311700292 | 2311700445 | 2311700547 | 2311700786 |

(No. of candidates: 50)

**Date of Medical Examination: 02/07/2024 at 8.30 AM**

|            |            |            |            |            |
|------------|------------|------------|------------|------------|
| 2311700791 | 2311700966 | 2311701284 | 2311701389 | 2311701578 |
| 2311700799 | 2311701000 | 2311701291 | 2311701401 | 2311701582 |
| 2311700811 | 2311701020 | 2311701328 | 2311701403 | 2311701589 |
| 2311700828 | 2311701096 | 2311701334 | 2311701453 | 2311701596 |
| 2311700867 | 2311701101 | 2311701335 | 2311701497 | 2311701601 |
| 2311700884 | 2311701104 | 2311701336 | 2311701498 | 2311701647 |
| 2311700901 | 2311701125 | 2311701337 | 2311701508 | 2311701657 |
| 2311700906 | 2311701223 | 2311701347 | 2311701512 | 2311701697 |
| 2311700928 | 2311701236 | 2311701367 | 2311701525 | 2311701704 |
| 2311700941 | 2311701244 | 2311701380 | 2311701566 | 2311701716 |

(No. of candidates: 50)

**Date of Medical Examination: 03/07/2024 at 8.30 AM**

|            |            |            |            |            |
|------------|------------|------------|------------|------------|
| 2311701718 | 2311701877 | 2311702073 | 2311702301 | 2311702462 |
| 2311701743 | 2311701879 | 2311702083 | 2311702302 | 2311702498 |
| 2311701757 | 2311701901 | 2311702108 | 2311702307 | 2311800036 |
| 2311701760 | 2311701902 | 2311702176 | 2311702338 | 2311800049 |
| 2311701762 | 2311701908 | 2311702184 | 2311702353 | 2311800063 |
| 2311701779 | 2311701928 | 2311702187 | 2311702370 | 2311800099 |
| 2311701812 | 2311701949 | 2311702218 | 2311702406 | 2311800188 |
| 2311701825 | 2311702022 | 2311702265 | 2311702423 | 2311800197 |
| 2311701834 | 2311702035 | 2311702286 | 2311702428 | 2311800237 |
| 2311701870 | 2311702044 | 2311702296 | 2311702431 | 2311800245 |

(No. of candidates: 50)

**Date of Medical Examination: 04/07/2024 at 8.30 AM**

|            |            |            |            |            |
|------------|------------|------------|------------|------------|
| 2311800252 | 2311800447 | 2311800741 | 2311800815 | 2311800992 |
| 2311800294 | 2311800487 | 2311800744 | 2311800821 | 2311800998 |
| 2311800304 | 2311800496 | 2311800761 | 2311800835 | 2311800999 |
| 2311800312 | 2311800504 | 2311800765 | 2311800845 | 2311801000 |
| 2311800336 | 2311800616 | 2311800771 | 2311800869 | 2311801066 |
| 2311800340 | 2311800622 | 2311800789 | 2311800882 | 2311801105 |
| 2311800347 | 2311800624 | 2311800791 | 2311800941 | 2311801111 |
| 2311800415 | 2311800659 | 2311800793 | 2311800944 | 2311801140 |
| 2311800416 | 2311800666 | 2311800800 | 2311800949 | 2311801141 |
| 2311800420 | 2311800673 | 2311800801 | 2311800964 | 2311801182 |

(No. of candidates: 50)

**Date of Medical Examination: 05/07/2024 at 8.30 AM**

|            |            |            |            |            |
|------------|------------|------------|------------|------------|
| 2311801209 | 2311801301 | 2311801357 | 2311801525 | 2311801680 |
| 2311801243 | 2311801303 | 2311801363 | 2311801549 | 2311801709 |
| 2311801247 | 2311801312 | 2311801372 | 2311801551 | 2311801719 |
| 2311801258 | 2311801317 | 2311801375 | 2311801553 | 2311801734 |
| 2311801264 | 2311801319 | 2311801376 | 2311801560 | 2311801806 |
| 2311801271 | 2311801326 | 2311801407 | 2311801565 | 2311801813 |
| 2311801273 | 2311801333 | 2311801420 | 2311801573 | 2311801814 |
| 2311801279 | 2311801344 | 2311801437 | 2311801602 | 2311801820 |
| 2311801293 | 2311801352 | 2311801441 | 2311801616 | 2311801823 |
| 2311801298 | 2311801355 | 2311801446 | 2311801633 | 2311801845 |

(No. of candidates: 50)

**Date of Medical Examination: 06/07/2024 at 8.30 AM**

|            |            |            |            |            |
|------------|------------|------------|------------|------------|
| 2311801861 | 2311802118 | 2311802417 | 2311802563 | 2311802760 |
| 2311801887 | 2311802122 | 2311802437 | 2311802568 | 2311802810 |
| 2311801916 | 2311802162 | 2311802440 | 2311802589 | 2311802815 |
| 2311801923 | 2311802231 | 2311802487 | 2311802660 | 2311802825 |
| 2311801940 | 2311802279 | 2311802500 | 2311802661 | 2311802858 |
| 2311802006 | 2311802290 | 2311802508 | 2311802665 | 2311802866 |
| 2311802029 | 2311802308 | 2311802553 | 2311802723 | 2311802875 |
| 2311802059 | 2311802362 | 2311802558 | 2311802728 | 2311802897 |
| 2311802102 | 2311802366 | 2311802560 | 2311802752 | 2311802899 |
| 2311802109 | 2311802368 | 2311802561 | 2311802754 | 2311802916 |

(No. of candidates: 50)

**Date of Medical Examination: 08/07/2024 at 8.30 AM**

|            |
|------------|
| 2311802927 |
| 2311803026 |
| 2311803052 |
| 2311803087 |
| 2311803090 |
| 2311803091 |

|            |
|------------|
| 2311803109 |
| 2311803115 |
| 2311803121 |
| 2311803151 |
| 2311803154 |
| 2311803161 |

|            |
|------------|
| 2311803164 |
| 2311803180 |
| 2311803199 |
| 2311803239 |
| 2312100029 |
| 2312100079 |

|            |
|------------|
| 2312100080 |
| 2312100109 |
| 2312100113 |
| 2312100127 |
| 2312100134 |
| 2312100144 |

|            |
|------------|
| 2312100166 |
| 2312100197 |

(No. of candidates: 26)

**Place: Hyderabad**  
**Date: 28/06/2024**

**Sd/- Dr. E. Naveen Nicolas, IAS.,**  
**SECRETARY**

TELANGANA PUBLIC SERVICE COMMISSION: HYDERABAD

ASSISTANT MOTOR VEHICLES INSPECTOR IN TRANSPORT DEPARTMENT

(GENERAL RECRUITMENT)

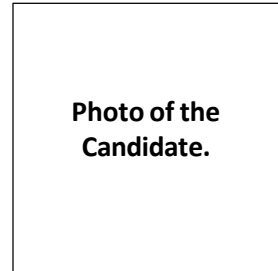
NOTIFICATION NO: 31/2022, DATED: 31/12/2022

Regd. No:

Date of Verification:

Name of the Candidate:

Signature of the Candidate:



CERTIFICATE OF EYE VISION

(To be certified by an Ophthalmologist not below the rank of Civil Assistant Surgeon)

I do hereby certify that I have examined (full name) Sri \_\_\_\_\_

\_\_\_\_\_, S/o, D/o, W/o \_\_\_\_\_

A candidate for the post of Assistant Motor Vehicle Inspector in Telangana Transport Department and certify that he possesses the following visual standards specified below without glasses.

- I) Right Eye: Distant Vision \_\_\_\_\_  
(Without Glasses) Near Vision \_\_\_\_\_
- II) Left Eye: Distant Vision \_\_\_\_\_  
(Without Glasses) Near Vision \_\_\_\_\_

III) Whether each eye has full field of vision without glasses YES/NO

IV) Colour Blindness YES/NO

V) Squint or any morbid conditions of the eyes or lids of either eye YES/NO

VI) AS PER VISUAL STANDARDS WHETHER THE CANDIDATE IS ELIGIBLE YES/NO

VII) Remarks If Any :-

Station:

Signature of the Medical Officer.

Date:

Name:

Designation:

TELANGANA PUBLIC SERVICE COMMISSION: HYDERABAD

ASSISTANT MOTOR VEHICLES INSPECTOR IN TRANSPORT DEPARTMENT

(GENERAL RECRUITMENT)

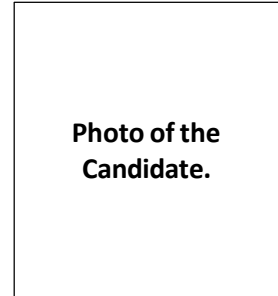
NOTIFICATION NO: 31/2022, DATED: 31/12/2022

Regd. No:

Date of Verification:

Name of the Candidate:

Signature of the Candidate:



CERTIFICATION OF PHYSICAL FITNESS

I have examined (full name) Sri / Smt. / Kum. \_\_\_\_\_  
S/o, D/o, W/o \_\_\_\_\_ a candidate to the post of  
Assistant Motor Vehicle Inspector in Telangana Transport Department and I am not able to  
discover that he/she has any disease, constitutional affection or bodily infirmity except  
that \_\_\_\_\_ (disease). I do not consider this as  
disqualification for the employment he/she seeks.

I further certify that in my opinion his/her general physical condition is such as to  
enable him to perform efficiently the active duties of Executives Service.

1. HEIGHT- \_\_\_\_\_ Cms.

2. CHEST MEASUREMENT

(A) On full inspiration \_\_\_\_\_ Cms.

(B) On full Expiration \_\_\_\_\_ Cms.

(C) Difference (Expansion) \_\_\_\_\_ Cms.

3. Indicate YES or NO against each of the following items:

I) Knock Knees YES/NO

II) Pigeon Chest YES/NO

III) Flat Foot YES/NO

IV) Varicose Veins YES/NO

V) Hammer toes YES/NO

VI) Fractured limbs YES/NO

VII) Decayed teeth YES/NO

Signature of the Medical Officer -1  
Name:

Designation:

Signature of the Medical Officer- 2.  
Name:

Designation:

Signature of the Medical Officer- 3  
Name:

Designation: