



UNION PUBLIC SERVICE COMMISSION

EXAMINATION NOTICE NO. 4/2026 CDS- I

DATED –10.12.2025

(Last Date for Submission of Applications: 30.12.2025)

COMBINED DEFENCE SERVICES EXAMINATION (I), 2026
[INCLUDING SSC WOMEN (NON-TECHNICAL) COURSE]
(Commission's Website <https://upsc.gov.in>)

IMPORTANT

The Online Application Portal of Union Public Service Commission for registration and filling up of application form online has four cards/modules, three of which namely, Account creation, Universal Registration and Common Application Form are common to all examination applications and can be filled anytime by the candidate while the fourth card/module is examination specific and can be filled during the time period allowed in notification of an examination. Applicants are required to apply online by using the website <https://upsconline.nic.in>.

Once a candidate has registered on the Online Application Portal, a Universal Registration Number (URN) is generated which is common for all the examinations of the Commission. After filling up of the examination specific form, Application Number is generated which is examination specific and is to be retained by the applicant alongwith the URN for any future communication with the Commission. While the URN will be unique and will remain constant, the Application Number will be dynamic in nature and will vary from examination to examination.

Detailed instructions are available on the home page of the portal as well as with all profiles/modules to guide the candidates for filling up the application and upload the documents. Candidates are advised to first go through these Instructions carefully and prepare documents in advance to have a smooth flow during filling up of form and document uploading.

Applicants are strongly advised to use their Aadhaar Card as ID documents for easy, effortless and seamless verification and authentication of ID and other details.

1. CANDIDATES TO ENSURE THEIR ELIGIBILITY FOR THE EXAMINATION:

The candidates applying for the examination should ensure that they fulfil all the eligibility conditions for admission to the Examination. Their admission at all the stages of the examination will be purely provisional subject to satisfying the prescribed eligibility conditions.

Mere issue of e-Admit Card to the candidate will not imply that his/her candidature has been finally cleared by the Commission.

Verification of eligibility conditions with reference to original documents will be taken up only after the candidate has qualified for interview/Personality Test.

2. HOW TO APPLY

Candidates are required to apply online by using the website <https://upsconline.nic.in>. Candidates are advised to go through the General instructions, Profile/Module wise instructions and instructions for uploading of documents before proceeding to fill up the form. A candidate who is willing to apply for Combined Defence Services Examination shall be required to submit the requisite information and supporting documents towards various claims, such as date of birth, educational qualification, etc as may be sought by the Commission alongwith the Universal Registration Number (URN), Common Application Form (CAF) and the fourth module i.e. Examination Specific module (including fees and centre etc.). Failure to provide the required information/documents alongwith the Common Application Form (CAF) will entail cancellation of candidature for the examination.

NOTE 1:- The Commission provides a one-time facility for candidates to update or modify their Universal Registration Number (URN) profile. Please note that any changes made to the URN Profile will not be reflected in applications already submitted. The updated information will apply only to applications submitted after the candidate has made the necessary changes and successfully re-locked the URN Profile.

NOTE 2- Live Photo Capture for filling up of Common Application Form (CAF): Applicants are required to upload their photograph and also capture their live photograph while filling up the Common Application Form (CAF). Applicants must ensure that the uploaded photograph and the live photograph captured is clear as per instructions given on “Instructions and FAQs > Instruction for filling the form > Photos and Signature” available on the Commission’s website <https://upsconline.nic.in>.

2.1 The candidate will not be allowed to withdraw his/her applications after the submission of the same.

2.2 Candidate should have details of one Photo ID Card viz. Aadhaar Card/Voter Card(EPIC)/PAN Card/Passport/Driving License/Any other Photo ID Card issued by the State/Central Government. The details of this Photo ID Card will have to be provided by the candidate while filling up the Universal Registration Number (URN) Profile. This Photo ID Card will be used for all future reference and the candidate is advised to carry this Photo ID Card while appearing for Examination/Personality Test/SSB.

2.3 Applicants are strongly advised to use their Aadhaar Card as ID documents for easy, effortless and seamless verification and authentication of ID and other details.

3. LAST DATE FOR SUBMISSION OF APPLICATIONS:

The Online Applications can be filled upto 06:00 PM of 30th December, 2025. The eligible candidates shall be issued an e-Admit Card on the last working day of the preceding week of the date of the examination which will be made available on the UPSC website (<https://upsconline.nic.in>) for downloading by the candidates. Admit Card will not be sent by any other means e.g. by post or e-mail.

4. Marking Answers in the OMR Sheet

For both writing and marking answers in the OMR sheet (Answer Sheet) candidates must use **black ball pen** only. Pen of any other colour is not permitted. Do not use Pencil or Ink pen. Candidates should note that any omission/mistake/discrepancy in encoding/filling of details in the OMR answer sheet especially with regard to Roll Number and Test Booklet Series Code will render the answer sheet liable for rejection. **Candidates are further advised to read carefully the “Special Instructions” contained in Appendix- II of the Notice.**

5 PENALTY FOR WRONG ANSWERS:

Candidates should note that there will be penalty (**Negative Marking**) for wrong answers marked by a candidate in the Objective Type Question Papers.

6. Online Question Paper Representation Portal (QPrep)

The Commission provides opportunity to the candidates to make representations to the Commission on the questions asked in the Papers of the Examination in a time frame of 7 days (a week) i.e. from the next day of the Examination Date to 6.00 p.m. of the 7th day. Such representation must be submitted through the “**Online Question Paper Representation Portal (QPrep)**” only by accessing the URL <https://upsconline.gov.in/miscellaneous/QPrep/>. No representation by email/post/hand or by any other mode shall be accepted and the Commission shall not involve into any correspondence with the candidates in this regard. No representation shall be accepted under any circumstances after this window of 7 days is over.

7. HELPDESK FOR CANDIDATES

The Commission has established a dedicated helpline to assist the candidates during the application process. Candidates seeking clarification, guidance, or assistance related to the application process or examination details can contact the helpline no. **011-24041001** or **email ID – upscsoap@nic.in**. The helpline will be operational from **10:00 AM to 5:30 PM** on all working days during the Application Window i.e. from **10.12.2025 to 30.12.2025**. Applicants may utilize this service for any issues relating to the application process, including fee payment, uploading of documents, etc.

8. MOBILE PHONES BANNED:

(a) The use of any mobile phone (even in switched off mode), pager or any electronic equipment or programmable device or storage media like pen drive, smart watches etc. or camera or blue tooth devices or any other equipment or related accessories either in working or switched off mode capable of being used as a communication device during the examination is strictly prohibited. Any infringement of these instructions shall entail disciplinary action including ban from future examinations.

(b) Candidates are advised in their own interest not to bring any of the banned item including bags, mobile phones or any valuable/costly items to the venue of the examination, as **no** arrangement for safe-keeping will be made at the venue of the examination. Commission will not be responsible for any loss in this regard.

9. Please follow the Instruction in respect of uploading of Photograph as elaborated in the Instructions to upload documents in the home page of the online application portal.

10. The candidates should reach the venue of the Examination well in time at least 30 minutes prior to the commencement of each session of the Examination. No late entry will be allowed inside the Exam-venue under any circumstances.

11. Face Authentication for Candidates at the Examination Venue

In order to ensure a secure and smooth examination process, all candidates will be required to undergo face authentication at the examination venue mandatorily. Candidates are advised to enter the examination venue well in time for face authentication/identity verification and frisking.

CANDIDATES ARE REQUIRED TO APPLY ONLINE AT <https://upsconline.nic.in> ONLY. NO OTHER MODE IS ALLOWED FOR SUBMISSION OF APPLICATION.

GOVERNMENT STRIVES TO HAVE A WORKFORCE WHICH REFLECTS GENDER BALANCE AND WOMEN CANDIDATES ARE ENCOURAGED TO APPLY.

No.F.8/02/2025 -E.I(B)—Combined Defence Services Examination (I), 2026 will be conducted by the Union Public Service Commission on 12th April, 2026 for admission to the under mentioned courses :—

S. No.	Name of the Course	Approximate No. of Vacancies (Refer Note –iii)
1.	Indian Military Academy, Dehradun –162 nd (DE) Course commencing in January 2027 [including 13 vacancies reserved for NCC 'C' Certificate (Army Wing) holders]	100
2.	Indian Naval Academy, Ezhimala - Course commencing in January 2027 Executive Branch (General Service)/Hydro [including 06 vacancies for NCC 'C' Certificate (Naval Wing) holders and 01 for Hydro]	26
3.	Air Force Academy, Hyderabad - (Pre-Flying) Training Course commencing in January 2027 i.e. 221 F(P) Course. [including 03 vacancies reserved for NCC 'C' Certificate (Air Wing) holders through NCC Special Entry]	32
4.	Officers' Training Academy, Chennai (Madras) 125 th SSC (Men) (NT) (UPSC) Course Commencing in April 2027.	275
5.	Officers' Training Academy, Chennai (Madras) 125 th SSC Women (NT) (UPSC) Course commencing in, April 2027.	18
	Total	451

NOTE (i) Indian Army publishes vacancies for Men and Women separately for various entries keeping into account the operational and administrative needs of the Force as envisaged in the existing and future scenarios. Though the vacancies for Men and Women categories as per SSC(NT) Courses are being notified through a common Notification and tested through a common written examination for administrative purpose, SSC(NT) Men and SSC(NT) Women are separate entries and the selection for both these categories is done **separately but in gender pure manner** as per vacancies **notified**. THE PREPARATION OF WRITTEN RESULTS AND FINAL MERIT LISTS FOR SSC(NT) MEN AND SSC(NT) WOMEN CATEGORIES WILL ALSO BE DONE SEPARATELY **AS PER VACANCY NOTIFIED**.

NOTE (ii) : The date of holding the examination as mentioned above may be changed, if so required, at the discretion of the Commission.

NOTE (iii) : The number of vacancies given above is tentative and may be changed at any stage of selection process by Services H. Q. as per organisation requirement at that point of time.

N.B. (I) (a) : Candidates are required to specify clearly in respective column of the Exam Specific Module the Services for which he/she wishes to be considered in the order of his/her preference. A male candidate is advised to indicate as many preferences as he wishes to, subject to the condition given at paras (b) and (c) below, so that having regard to his rank in the order of merit due consideration can be given to his preferences when making appointment.

(b) (i) : If a male candidate is competing for Short Service Commission (Army) only, he should indicate OTA as the one and only choice. However, a male candidate competing for Short Service Commission Course at OTA as well as Permanent Commission course at IMA, Indian Naval Academy and Air Force Academy should indicate OTA as his last preference; otherwise OTA will be deemed to be the last choice even if it is given a higher preference by the candidate.

(b) (ii) : Women candidates are being considered only for Short Service Commission at OTA. They should indicate OTA as the only choice.

(c) Candidates who desire to join Air Force Academy must indicate AFA as first choice, as they have to be administered Computer Pilot Selection System (CPSS) and/or and AF Medicals at Central Establishment/Institute of Aviation Medicines. Choice exercised for AFA as second/third etc. will be treated as invalid.

(d) Candidates should note that, except as provided in N.B. (II) below, they will be considered for appointment to those courses only for which they exercise their preference and for no other course(s). It is mandatory for a candidate to exercise at least one preference to be considered for service allocation.

(e) No request for addition/alteration in the preferences already indicated by a candidate in his/her application will be entertained by the Commission. Further, in view of multiple reconfirmations of information submitted during the application process, the Commission has decided not to extend the facility of making any correction(s) in any field(s) of the application form after its submission and closure of the application window of this Examination. Second choice will come for consideration only when the first choice is not offered to the candidate by Services HQ. When first choice is offered and a candidate declines the same, his/her candidature will be cancelled for all other choices for regular Commission.

N.B. (II) All Left over Finally Qualified candidates of IMA/INA/AFA courses who could not be inducted for the said course due to the lack of vacancies, will be considered for SSC(NT), even if they have not indicated their choice for this course, subject to the following conditions:-

- i) Vacancies are available after issuing the Joining Letters to those candidates who had applied and qualified for SSC(NT)
- ii) Left over finally qualified candidates are willing to join SSC(NT)
- iii) Such left over finally qualified and willing candidates will be placed in order of merit after the last candidate who had opted SSC(NT), subject to number of vacancies available for SSC(NT). Accordingly, such Left over candidates will be issued Joining Letter in order of merit.

NOTE 1: NCC 'C' Certificate (Army Wing (Senior Division)/ Air Wing/Naval Wing) holders may also compete for the vacancies in the Short Service Commission Course but since there is no reservation of vacancies for them in this course, they will be treated as general candidates for the purpose of filling up vacancies in this course. Candidates who have yet to pass NCC 'C' Certificate (Army Wing (Senior Division)/ Air Wing/Naval Wing) examination, but are otherwise eligible to compete for the reserved vacancies, may also apply but they will be required to submit the proof of passing the NCC 'C' Certificate (Army Wing (Senior Division)/ Air Wing/Naval Wing) examination to reach the IHQ of MoD (Army) / Dte Gen of Rtg (Rtg A) CDSE Entry for SSC male candidates and SSC women entry for female candidates West Block III, R. K. Puram, New Delhi-110066 in case of IMA/SSC first choice candidates and IHQ of MOD (Navy) DMPR, (OI&R Section), Room No. 204, 'C' Wing, Sena Bhawan, New Delhi-110 011 in case of Navy first choice candidates and Dte of Personnel (Offrs), Kasturba Gandhi Marg, New Delhi-110001. Phone No. 23010231 Extn. 7645/7646/7610 in case of Air Force first choice candidates by 13th November, 2026. To be eligible to compete for reserved vacancies the candidates should have served for not less than 3 academic years in the Senior Division Army Wing Air Wing/Naval Wing of National Cadet Corps and should not have been discharged from the NCC for more than 24 months for IMA/Indian Naval Academy/Air Force Academy courses on the last date of receipt of Application in the Commission's Office.

NOTE 2 : In the event of sufficient number of qualified NCC 'C' Certificate (Army Wing (Senior Division)/ Air Wing/Naval Wing) holders not becoming available on the results of the examination to fill all the vacancies reserved for them in the Indian Military Academy Course/Air Force Academy Course/Indian Naval Academy Course, the unfilled reserved vacancies shall be treated as unreserved and filled by general candidates. Admission to the above courses will be made on the results of the written examination to be conducted by the Commission followed by intelligence and personality test by the Services Selection Board of candidates who qualify in the written examination. The details regarding the (a) scheme, standard, syllabus of the examination, (b) Special instructions to candidates to objective type tests (c) Guidelines with regard to physical standards for admission to the Academy

and (d) Brief particulars of services etc. for candidates joining the Indian Military Academy, Indian Naval Academy, Air Force Academy and Officers' Training Academy are given in Appendices I, II, III and IV respectively.

2. CENTRES OF EXAMINATION:

The Examination will be held at the following Centres:

1	AGARTALA	28	GHAZIABAD	55	NAVI MUMBAI
2	AGRA	29	GORAKHPUR	56	PANAJI (GOA)
3	AJMER	30	GURUGRAM	57	PATNA
4	AHMEDABAD	31	GWALIOR	58	SRI VIJAYA PURAM (PORT BLAIR)
5	AIZAWL	32	HYDERABAD	59	PRAYAGRAJ (ALLAHABAD)
6	ALIGARH	33	IMPHAL	60	PUDUCHERRY
7	ALMORA (UTTARAKHAND)	34	INDORE	61	PUNE
8	ANANTPUR (ANDHRA PRADESH)	35	ITANAGAR	62	RAIPUR
9	CHHATRAPATI SAMBHAJINAGAR [AURANGABAD (MAHARASHTRA)]	36	JABALPUR	63	RAJKOT
10	BENGALURU	37	JAIPUR	64	RANCHI
11	BAREILLY	38	JAMMU	65	SAMBALPUR
12	BHOPAL	39	JODHPUR	66	SHILLONG
13	BHUBANESWAR	40	JORHAT	67	SHIMLA
14	BILASPUR (CHHATISGARH)	41	KARGIL	68	SILIGUDI
15	CHANDIGARH	42	KOCHI	69	SRINAGAR
16	CHENNAI	43	KOHIMA	70	SRINAGAR (UTTARAKHAND)
17	COIMBATORE	44	KOLKATA	71	SURAT
18	CUTTACK	45	KOZHIKODE (CALICUT)	72	THANE
19	DEHRADUN	46	LEH	73	THIRUVANANTHAPURAM
20	DELHI	47	LUCKNOW	74	TIRUCHIRAPALLI
21	DHARAMSHALA	48	LUDHIANA	75	TIRUPATI
22	DHARWAD	49	MADURAI	76	UDAIPUR
23	DISPUR	50	MANDI	77	VARANASI
24	FARIDABAD	51	MUMBAI	78	VELLORE
25	GANGTOK	52	MYSORE	79	VIJAYAVADA
26	GAYA	53	NAGPUR	80	VISHAKHAPATNAM
27.	GAUTAM BUDDH NAGAR	54	NASHIK	81	HANUMAKONDA (WARANGAL URBAN)

Applicants should note that there will be a ceiling on the number of candidates allotted to each of the centres except Chennai, Dispur, Kolkata and Nagpur. Allotment of Centres will be on the first-apply-first-allot basis and once the capacity of a particular centre is attained, the same will be frozen. Applicants, who cannot get a centre of their choice due to ceiling, will be required to choose a Centre from the remaining ones. Applicants are, thus, advised that they may apply early so that they could get a Centre of their choice.

NB : Notwithstanding the aforesaid provision, Commission reserve the right to change the Centres at their discretion if the situation demands.

Candidates admitted to the examination will be informed of the time table and place or places of examination. Candidates should note that no request for change of centre will be granted.

NOTE : While filling in his/her Examination Specific module, the candidates should carefully decide about his/her choice for the centre for the examination.

If any candidate appears at a Centre/Paper other than the one indicated by the Commission in his/her e-Admit Card, the papers of such a candidate will not be valued and his/her candidature will be liable to cancellation.

3. CONDITIONS OF ELIGIBILITY:

(a) Nationality: A candidate must either be:

- (i) a Citizen of India, or
- (ii) a subject of Nepal, or
- (iii) a person of Indian origin who has migrated from Pakistan, Burma, Sri Lanka and East African Countries of Kenya, Uganda, the United Republic of Tanzania, Zambia, Malawi, Zaire and Ethiopia or Vietnam with the intention of permanently settling in India.

Provided that a candidate belonging to categories (ii) and (iii)-above shall be a person in whose favour a certificate of eligibility has been issued by the Government of India.

Certificate of eligibility will, however, not be necessary in the case of candidates who are Gorkha subjects of Nepal.

A candidate in whose case a certificate of eligibility is necessary, may be admitted to the examination provisionally subject to the necessary certificate being given to him/her by the Govt. before declaration of result by UPSC.

(b) Age Limits, Sex and Marital Status :

(i) For IMA— Unmarried male candidates born not earlier than 2nd January, 2003 and not later than 1st January, 2008 only are eligible.

(ii) For Indian Naval Academy— Unmarried male candidates born not earlier than 2nd January, 2003 and not later than 1st January, 2008 only are eligible.

(iii) For Air Force Academy—

Age: 20 to 24 years as on 1st January, 2027 i.e. born not earlier than 2nd January 2003 and not later than 1st January 2007. Upper age limit for candidates holding valid and current Commercial Pilot Licence issued by DGCA (India) is relaxable upto 26 yrs. i.e. born not earlier than 2nd January 2001 and not later than 1st January 2007 only are eligible.

Note: Candidate below 25 years of age must be unmarried. Marriage is not permitted during training. Married candidates aged 25 years or above are eligible to apply but during training period they will neither be provided married accommodation nor can they live with family out of the premises.

(iv) For Officers' Training Academy—(SSC Course for men) Unmarried male candidate born not earlier than 2nd January 2002 and not later than 1st January 2008 only are eligible.

(v) For Officers' Training Academy—(SSC Women Non-Technical Course) Unmarried women, issueless widows who have not remarried and issueless divorcees (in possession of divorce documents) who have not remarried are eligible. They should have been born not earlier than 2nd January 2002 and not later than 1st January 2008.

NOTE : Male divorcee/widower candidates cannot be treated as unmarried male for the purpose of their admission in IMA/INA/AFA/OTA, Chennai courses and accordingly they are not eligible for these courses.

The date of birth accepted by the Commission is that entered in the Matriculation/Secondary School Examination Certificate or in a certificate recognised by an Indian University as equivalent to Matriculation or in an extract from a Register of Matriculates maintained by a University, which

extract must be certified by the proper authority of the University or in the Matriculation/Secondary School Examination or an equivalent examination certificate. No other document relating to age like horoscopes, affidavits, birth extracts from Municipal Corporation, service records and the like will be accepted.

The expression Matriculation/Secondary School Examination Certificate in this part of the instruction includes the alternative certificates mentioned above.

Sometimes the Matriculation/Secondary School Examination Certificate does not show the date of birth, or only shows the age by completed years or completed years and months. In such cases a candidate must send in addition to the self attested/certified copy of Matriculation/Secondary School Examination Certificate a self attested/certified copy of a certificate from the Headmaster/Principal of the Institution from where he/she passed the Matriculation/Secondary School Examination showing the date of his/her birth or exact age as recorded in the Admission Register of the Institution.

NOTE 1 : Candidates should note that only the Date of Birth as recorded in the Matriculation/Secondary School Examination Certificate or an equivalent certificate on the date of submission of applications will be accepted by the Commission and no subsequent request for its change will be considered or granted.

NOTE 2 : Candidates should also note that once a Date of Birth has been claimed by them in the Online Application Form and entered in the records of the Commission for the purpose of admission to an Examination, no change will be allowed subsequently or at a subsequent examination on any ground whatsoever.

NOTE 3 : The candidates should exercise due care while entering their date of birth in the respective column of the Universal Registration Number (URN) profile for the Examination. If on verification at any subsequent stage any variation is found in their date of birth from the one entered in their Matriculation or equivalent examination certificate, disciplinary action will be taken against them by the Commission under the Rules.

(c) Educational Qualifications:

(i) For I.M.A. and Officers' Training Academy, Chennai — Degree of a recognised University or equivalent.

(ii) For Indian Naval Academy— Degree in Engineering from a recognised University/Institution

(iii) For Air Force Academy—Degree of a recognised University (with Physics and Mathematics at 10+2 level) or Bachelor of Engineering.

Graduates with first choice as Army/Navy/Air Force are to submit proof of Graduation/provisional certificates on the date of commencement of the SSB Interview at the SSB.

Candidates who are studying in the final year/semester Degree course and have yet to pass the final year degree examination can also apply and they will be required to submit proof of passing the degree examination at the time of commencement of course to reach the IHQ of MoD (Army), Rtg 'A', CDSE Entry, West Block III, R. K. Puram, New Delhi-110066 in case of IMA/SSC first choice candidates and Naval HQ "DMPR" (OI & R Section), Room No. 204, 'C' Wing, Sena Bhawan, New Delhi-110011 in case of Navy first choice candidates Dte of Personnel (Offrs), Kasturba Gandhi Marg, New Delhi-110001. Phone No. 23010231 Extn. 7645/7646/7610 in case of Air Force first choice candidates by the following dates failing which their candidature will stand cancelled:

(i) For admission to IMA on or before 1st January 2027 Indian Naval Academy on or before 1st January 2027 and Air Force Academy on or before 13th November 2026.

(ii) For admission to Officers' Training Academy, Chennai on or before 1st April 2027.

Candidates possessing professional and technical qualifications which are recognised by government as equivalent to professional and technical degrees would also be eligible for admission to the examination.

In exceptional cases the Commission may treat a candidate, who does not possess any of the qualifications prescribed in this rule as educationally qualified provided that he/she possesses qualifications, the standard of which in the opinion of the Commission, justifies his/her admission to the examination.

NOTE I : Candidates, who have yet to pass their degree examination will be eligible only if they are studying in the final year of degree examination. Those candidates who have yet to qualify in the final year Degree Examination and are allowed to appear in the UPSC Examination should note that this is only a special concession given to them. They are required to submit proof of passing the Degree Examination by the prescribed date and no request for extending this date will be entertained on the grounds of late conduct of basic qualifying University Examination, delay in declaration of results or any other ground whatsoever. Candidates who are studying in the final year/semester degree course are required to submit at the time of SSB interview a bonafide certificate issued by University/College stating that they will be able to submit their proof of passing the graduation degree examination by the specified date, failing which their candidature will be cancelled.

NOTE II : Candidates who are debarred by the Ministry of Defence from holding any type of commission in the Defence Services shall not be eligible for admission to the examination and if admitted, their candidature will be cancelled.

NOTE III : In the event of Air Force candidates being suspended from Flying training for failure to learn flying, they would be absorbed in the Navigation/Ground Duty (Non Tech) Branches of the IAF. This will be subject to availability of vacancies and fulfilling the laid down qualitative requirements.

(d) Physical Standards:

Candidates must be physically fit according to physical standards for admission to **Combined Defence Services Examination (I), 2026** as per guidelines given in Appendix-III.

4. FEE :

Candidates (excepting Female/SC/ST candidates who are exempted from payment of fee) are required to pay a fee of Rs. 200/- (Rupees Two Hundred Only)—by using Visa/Master/Rupay Credit/Debit Card/UPI Payment or by using internet banking facility of any Bank.

NOTE-1 : Candidates should note that payment of examination fee can be made only through the modes prescribed above. Payment of fee through any other mode is neither valid nor acceptable. Applications submitted without the prescribed fee/mode (unless remission of fee is claimed) shall be summarily rejected.

NOTE-2 : Fee once paid shall not be refunded under any circumstances nor can the fee be held in reserve for any other examination or selection.

NOTE 3 : For the applicants in whose case payments details have not been received from the bank, they will be treated as fictitious payment cases and their applications will be rejected in the first instance. A list of all such applicants shall be made available on the Commission website within two weeks after the last day of submission of online application. The applicants shall be required to submit the proof of their fee payment within 10 days from the date of such communication either by hand or by speed post to the Commission. On receipt of documentary proof, genuine fee payment cases will be considered and their applications will be revived, if they are otherwise eligible.

ALL FEMALE CANDIDATES AND CANDIDATES BELONGING TO SCHEDULED CASTES/SCHEDULED TRIBES ARE NOT REQUIRED TO PAY ANY FEE. NO FEE

EXEMPTION IS, HOWEVER, AVAILABLE TO OBC CANDIDATES AND THEY ARE REQUIRED TO PAY THE FULL PRESCREIBED FEE.

5. HOW TO APPLY:

(a) Candidates are required to apply online by using the website <https://upsconline.nic.in>. Candidates are advised to go through the General instruction, Profile/Module-wise instructions and instructions for upload of documents before proceeding to fill up the form. These instructions are available on the menu bar of the Home page. candidate who is willing to apply for Combined Defence Services Examination shall be required to apply on-line and submit the requisite information and supporting documents towards various claims, such as date of birth, educational qualification, etc. as may be sought by the Commission alongwith the Universal Registration Number (URN), Common Application Form (CAF) and the fourth module i.e. Examination specific module (including fees and centre etc). Failure to provide the required information/documents alongwith the Common Application Form (CAF) will entail cancellation of candidature for the examination.

NOTE 1:- The Commission provides a one-time facility for candidates to update or modify their Universal Registration Number (URN) profile. Please note that any changes made to the URN Profile will not be reflected in applications already submitted. The updated information will apply only to applications submitted after the candidate has made the necessary changes and successfully re-locked the URN Profile.

NOTE 2- Live Photo Capture for filling up of Common Application Form (CAF):

Applicants are required to upload their photograph and also capture their live photograph while filling up the Common Application Form (CAF). Applicants must ensure that the uploaded photograph and the live photograph captured is clear as per instructions given on “Instructions and FAQs > Instruction for filling the form > Photos and Signature” available on the Commission’s website <https://upsconline.nic.in>.

No request for addition/alteration in the preferences already indicated by a candidate in his/her application will be entertained by the Commission. Further no correction /alteration/modification in any field(s) of the Universal Registration Number (URN), Common Application Form (CAF) and Examination specific module is allowed after its submission and closure of the application window of this Examination.

No queries, representations etc. shall be entertained by the Commission in respect of correcting details that are required to be filled up by the candidates by exercising due diligence and caution as the timely completion of examination process is of paramount importance.

All candidates whether already in Government Service including candidates serving in the Armed Forces, Government owned industrial undertakings or other similar organizations or in private employment should submit their applications online direct to the Commission.

N.B.I: Persons already in Government Service, whether in permanent or temporary capacity or as work charged employees other than casual or daily rated employees or those serving under the Public Enterprises are, however, required to inform their Head of Office/Department in writing that they have applied for the Examination.

N.B.II: Candidates serving in the Armed Forces are required to inform their Commanding Officer in writing that they have applied for this examination. They are also required to submit NOC in this regard at the time of SSB interview.

Candidates should note that in case a communication is received from their employer by the Commission withholding permission to the candidates applying for/appearing at the examination, their applications will be liable to be rejected/candidatures will be liable to be cancelled.

NOTE: APPLICATIONS WITHOUT THE PRESCRIBED FEE (UNLESS REMISSION OF FEE IS CLAIMED AS IN PARA 4 ABOVE) OR INCOMPLETE APPLICATIONS SHALL BE SUMMARILY REJECTED.

No representation or correspondence regarding such rejection shall be entertained under any circumstances. Candidates are not required to submit alongwith their applications any certificate in support of their claims regarding age, educational qualifications, Scheduled Caste/Scheduled Tribe/OBC and fee remission etc.

The candidates applying for the examination should ensure that they fulfil all the eligibility conditions for admission to the examination.

Their admission at all the stages of examination for which they are admitted by the Commission viz. written examination and interview test will be purely provisional, subject to their satisfying the prescribed eligibility conditions. If on verification at any time before or after the written examination or Interview Test, it is found that they do not fulfil any of the eligibility conditions, their candidature for the examination will be cancelled by the Commission.

Candidates are advised to keep ready the following documents in original alongwith their self attested copies soon after the declaration of the result of the written part of the examination which is likely to be declared in the month of May, 2026 for submission to the Army HQ/Naval HQ/Air HQ as the case may be:

- (1) Matriculation/Secondary School Examination Certificate or its equivalent showing date of birth
- (2) Degree/Provisional Degree Certificate/Marks sheet showing clearly having passed degree examination and eligible for award of degree.

In the first instance all qualified candidates eligible for SSB interview will carry their original Matriculation/Secondary School Examination Certificate as also their Degree/Provisional Degree Certificate/Marks sheet with them while going to the Services Selection Centres for SSB interview. Candidates who have not yet qualified the final year Degree examination must carry with them a certificate in original from the Principal of the College/Institution stating that the candidate has appeared/is appearing at the final year Degree examination. Candidates who do not carry the above certificates with them while going to the Services Selection Centres shall not be allowed to appear for the SSB interview. No relaxation for production of the above certificates in original at the selection centre is allowed, and candidates who do not carry with them any of these certificates in original will not be permitted to appear for their SSB test and interview and they will be sent back home at their own expense.

(1) If any of their claims is found to be incorrect/false/fraud/fabricated they may render themselves liable to disciplinary action by the Commission in terms of the following provisions:

A candidate who is or has been declared by the Commission to be guilty of :—

- (a) Obtaining support for candidature by the following means, namely :—
 - (i) offering illegal gratification to; or
 - (ii) applying pressure on; or
 - (iii) blackmailing, or threatening to blackmail any person connected with the conduct of the examination; or
- (b) impersonation; or
- (c) procuring impersonation by any person; or
- (d) submitting fabricated/incorrect documents or documents which have been tampered with; or
- (e) uploading irrelevant or incorrect photos/signature in the application form in place of actual photo/signature.
- (f) making statements which are incorrect or false or suppressing material information; or
- (g) resorting to the following means in connection with the candidature for the examination, namely :—
 - (i) obtaining copy of question paper through improper means;

- (ii) finding out the particulars of the persons connected with secret work relating to the examination;
 - (iii) influencing the examiners; or
 - (h) being in possession of or using unfair means during the examination; or
 - (i) writing obscene matter or drawing obscene sketches or irrelevant matter in the scripts; or
 - (j) misbehaving in the examination hall including tearing of the scripts, provoking fellow examinees to boycott examination, creating a disorderly scene and the like; or
 - (k) harassing, threatening or doing bodily harm to the staff employed by the Commission for the conduct of the examination; or
 - (l) being in possession of or using any mobile phone, (even in switched-off mode), pager or any electronic equipment or programmable device or storage media like pen drive, smart watches etc. or camera or Bluetooth devices or any other equipment or related accessories (either in working or switched off mode) capable of being used as a communication device during the examination; or
 - (m) violating any of the instructions issued to candidates along with their e-Admit card permitting them to take the examination; or
 - (n) attempting to commit or, as the case may be, abetting the commission of all or any of the acts specified in the foregoing clauses;
 - in addition to being liable to criminal prosecution, shall be disqualified by the Commission from the Examination held under these Rules; and/or shall be liable to be debarred either permanently or for a specified period :-
 - (i) by the Commission, from any examination or selection held by them;
 - (ii) by the Central Government from any employment under them;
- And shall be liable to face disciplinary action under the appropriate rules if already in service under Government.
- Provided that no penalty under this rule shall be imposed except after:—
- (i) giving the candidate an opportunity of making such representation in writing as the candidate may wish to make in that behalf; and
 - (ii) taking the representation, if any, submitted by the candidate within the period allowed for this purpose, into consideration.

(2) Any person who is found by the Commission to be guilty of colluding with a candidate(s) in committing or abetting the commission of any of the misdeeds listed at Clauses (a) to (m) above will be liable to action in terms of the Clause (n).

Note: If a candidate is found to be in possession or using unfair means, may not be allowed to continue in the said exam as soon as the incident comes to notice of the Examination functionaries and the action against the candidates may be taken in consultation with the Commission. Further, the candidate may also not be allowed in any of the subsequent papers of the said examination.

6. LAST DATE FOR SUBMISSION OF APPLICATIONS:

The Online Applications can be filled upto 30th December, 2025 till **6:00 PM**.

7. CORRESPONDENCE WITH THE COMMISSION/ARMY/NAVAL/AIR HEAD QUARTERS.

The Commission will not enter into any correspondence with the candidates about their candidature except in the following cases:

- (i) The eligible candidates shall be issued an e-Admit Card on the last working day of the preceding week of the date of the examination. The e-Admit Card will be made available in the UPSC website [<https://upsconline.nic.in>] for downloading by candidates. No Admit Card will be sent by post. For downloading the e-Admit Card the candidate must have his/her details like Application ID & Date of Birth etc.
- (ii) If a candidate does not receive his/her e-Admit Card or any other communication regarding his/her candidature for the examination Seven Days before the commencement of the

examination, he/she should at once contact the Commission. Information in this regard can also be obtained from the Facilitation Counter located in the Commission's Office either in person or **Helpdesk no. 011-24041001**. In case no communication is received in the Commission's Office from the candidate regarding non-receipt of his/her e-Admit Card at least Seven Days before the examination, he/she himself/herself will be solely responsible for non-receipt of his/her e-Admit Card.

No candidate will ordinarily be allowed to take the examination unless he/she holds an e-Admit Card for the examination. On downloading of Admit Card, check it carefully and bring discrepancies/errors, if any, to the notice of UPSC immediately.

The courses to which the candidates are admitted will be according to their eligibility as per age and educational qualifications for different courses and the preferences given by the candidates.

The candidates should note that their admission to the examination will be purely provisional based on the information given by them in the Application Form. This will be subject to verification of all the eligibility conditions.

- (iii) The decision of the Commission as to the acceptance of the application of a candidate and his/her eligibility or otherwise for admission to the Examination shall be final.
- (iv) Candidates should note that the name in the e-Admit Card in some cases, may be abbreviated due to technical reasons.
- (v) Candidates must ensure that their e-mail IDs & mobile number given in their applications are valid and active.

IMPORTANT: All communications to the Commission/Army Headquarters should invariably be made on email- upscsoap@nic.in and shall contain the following particulars.

1. Name and year of the examination.
2. URN (Universal Registration Number)
3. Application ID
4. Roll Number (if received)
5. Name of candidate (in full and in block letters)
6. Complete Postal Address as given in the application with telephone number, if any.
7. VALID AND ACTIVE registered EMAIL-ID / registered Mobile Number

N.B. (i) Communications not containing the above particulars may not be attended to.

N.B. (ii) If a letter/communication is received from a candidate after an examination has been held and it does not give his/her full name and Roll number, it will be ignored and no action will be taken thereon.

N.B. (iii) Candidates recommended by the Commission for interview by the Services Selection Board who have changed their addresses subsequent to the submission of their application for the examination should immediately after announcement of the result of the written part of the examination notify the changed address, along with an unstamped self addressed envelope, also to IHQ of MoD (Army)/Dte Gen Of Rtg (Rtg A) CDSE Entry Section for males and SSC Women Entry Section for women candidates, West Block-III, Ground Floor, Wing 1, Rama Krishna Puram, New Delhi-110066 in case of IMA/SSC first choice candidates and IHQ of MOD(Navy) DMPR (OI&R Section), Room No. 204, 'C' Wing, Sena Bhawan, New Delhi-110011 in case of Navy first choice candidates, and Dte of Personnel (Ofprs), Kasturba Gandhi Marg, New Delhi-110001. Phone No. 23010231 Extn. 7645/7646/7610 in case of Air Force first choice candidates. Failure to comply with this instruction will deprive the candidate of any claim to consideration in the event of his/her not receiving the summon letter for interview by the Services Selection Board. For all queries regarding allotment of centres, date of SSB interview, merit list, Joining Instructions, and any other relevant information regarding selection process, please visit website www.joinindianarmy.nic.in or contact in case of candidates having IMA or OTA as their first choice IHQ of MOD (NAVY)

DMPR (OI&R Section), Room No. 204, 'C' Wing, Sena Bhawan, New Delhi-110011 in the case of candidates having Navy as first choice and Dte of Personnel (Offrs), Kasturba Gandhi Marg, New Delhi-110001. Phone No. 23010231 Extn. 7645/7646/7610 in the case of candidates having Air Force as first choice.

Candidates are requested to report for SSB interview on the date intimated to them in the call up letter for interview. Requests for postponing interview will only be considered in very genuine circumstances and that too if it is administratively convenient for which Army Headquarters/Naval HQ/Air Headquarter will be the sole deciding authority. Such requests should be sent to Selection Centre/SSB from where the call for SSB interview has been received. Navy candidates can download their call letters from the naval website www.joinindiannavy.gov.in or send email at officer@navy.gov.in three weeks after publication of results.

N.B. In case a candidate does not get the interview call for SSB interview for IMA by-2nd week of July 2026 and by 2nd week of October 2026 for OTA, he/she should write to IHQ of MoD(Army)/Rtg. CDSE Entry/SSC Women Entry for Officers Training Academy, West Block-III, Ramakrishna Puram, New Delhi-110066 regarding non-receipt of the call-up letter. For similar query by the Navy/Air Force candidates, having first choice as given ibid, should write to Naval Hqrs. or Air Hqrs. as mentioned in N.B. III (in case of non-receipt of call by 4th week of August 2026).

8. ANNOUNCEMENT OF THE RESULTS OF THE WRITTEN EXAMINATION, INTERVIEW OF QUALIFIED CANDIDATES, ANNOUNCEMENT OF FINAL RESULTS AND ADMISSION TO THE TRAINING COURSES OF THE FINALLY QUALIFIED CANDIDATES.

The Union Public Service Commission shall prepare a list of candidates who obtain the minimum qualifying marks in the written examination as fixed by the Commission in their discretion. Candidates who are declared successful in the written exam will be detailed for intelligence and personality test at the Service Selection Board based on their preference by the respective service HQ. CANDIDATES WHO QUALIFY IN THE WRITTEN EXAM AND GIVEN THEIR FIRST CHOICE AS ARMY (IMA/OTA) ARE REQUIRED TO REGISTER THEMSELVES ON THE RECRUITING DIRECTORATE WEBSITE WWW.JOININDIANARMY.NIC.IN IN ORDER TO ENABLE THEM TO RECEIVE CALL UP INFORMATION FOR SSB INTERVIEW. THOSE CANDIDATES WHO HAVE ALREADY REGISTERED ON THE RECRUITING DIRECTORATE WEBSITE ARE ADVISED NOT TO REGISTER AGAIN. The email ID registered with DG Recruiting website i.e. www.joinindianarmy.nic.in and that given to UPSC must be same and unique to the applicant. Results of the test conducted by Service Selection Board will hold good for all the courses [i.e. Indian Military Academy (DE) Course, Dehradun, Indian Naval Academy, Ezhimala Course, Air Force Academy (Pre-Flying) Course, Hyderabad and SSC (NT) Course at OTA, Chennai] for which the candidate has qualified in the written exam, irrespective of the service HQ conducting it. Two-stage selection procedure based on Psychological Aptitude Test and intelligence Test has been introduced at Service Selection Boards. All the candidates will be put to stage one test on first day of reporting at Selection Centres. Only those candidates who qualify at stage one will be admitted to the second stage/remaining tests and all those who fail to pass stage one, will be returned. Only those candidate who qualify at stage two will be required to submit photocopy each of:- (i) Matriculation pass certificate or equivalent in support of date of birth, (ii) Bachelors Degree/Provisional Degree alongwith mark sheets of all the years/semesters in support of educational qualification.

Candidates will appear before the Services Selection Board and undergo the test there at their own risk and will not be entitled to claim any compensation or other relief from Government in respect of any injury which they may sustain in the course of or as a result of any of the tests given to them at the Services Selection Board whether due to the negligence of any person or otherwise. Candidates will be required to sign a certificate to this effect on the form appended to the application.

To be acceptable, candidates should secure the minimum qualifying marks separately in (i) written examination and (ii) SSB test as fixed by the Commission and Service Selection Board respectively in their discretion. The candidates will be placed in the order of merit on the basis of the total marks secured by them in the written examination and in the SSB tests. The form and manner of communication of the result of the examination to individual candidates shall be decided by the Commission in their discretion and the Commission will not enter into correspondence with them regarding the result.

Success at the examination confers no right of admission to the Indian Military Academy, Indian Naval Academy, Air Force Academy or the Officers' Training Academy as the case may be. The final selection will be made in order of merit subject to medical fitness and suitability in all other respects and number of vacancies available.

NOTE-1: Every candidate for the Air Force and Naval Aviation is given Pilot Aptitude Test only once. The Grade secured by him at the first test (CPSS and/or PABT) will therefore hold good for every subsequent interview at the Air Force Selection Board. Those who have failed Indian Navy Selection Board/Computer Pilot Selection System (CPSS) and/or Pilot Aptitude Battery Test earlier and those who habitually wear spectacles are not eligible for Air Force.

TEST/INTERVIEW AT AIR FORCE SELECTION BOARDS FOR THOSE CANDIDATES WHO APPLY FOR AIR FORCE THROUGH MORE THAN ONE SOURCE:- There are three modes of entry in F(P) course CDSE/NCC/AFCAT. Candidates who fail in Computer Pilot Selection System (CPSS) will be considered for other preferred services only if it is found that they have applied through CDS Exam. Candidates who qualify in the written examination for IMA(D.E) Course and/or Navy (S.E) Course and / or Air Force Academy course irrespective of whether they have also qualified for SSC Course or not will be detailed for SSB test in August-September 2026 and candidates who qualify for SSC Course only will be detailed for SSB tests in October-December 2026.

8.1 Rounding off marks and Tie Breaking Principle

The provisions relating to the rounding off of marks, wherever applicable, and the principles for resolving cases of tie in scores shall be as prescribed below:-

(A) Rounding off marks:

Marks obtained by the candidates shall be rounded off up to two decimal digits, at all stage(s) of the examination, by applying the standard rounding off principle, wherever applicable. Accordingly, while applying the tie-breaking principles, the rounded-off marks upto two decimal digits shall be considered for resolving all tie cases.

(B) Tie Breaking Principle

- (i) For IMA/INA/AFA : If the marks in aggregate (Final Marks) are equal, the candidate securing more marks in written total ("Paper-I : English, Paper-II : General Knowledge and Paper – III : Elementary Mathematics" put together) will be ranked higher;

For OTA : If the marks in aggregate (Final Marks) are equal, the candidate securing more marks in written total ("Paper-I : English and Paper-II : General Knowledge" put together) will be ranked higher;

- (ii) If the marks at (i) above are equal, the candidate securing more marks in "Paper-II : General Knowledge" will be ranked higher; and
- (iii) If the marks at (i) and (ii) above are also equal, the candidate senior in age will be ranked higher."

- (iv) In cases where a tie persists even after applying the above tie-breaking principles, it will be resolved at the discretion of the Commission.

9. DISQUALIFICATION FOR ADMISSION TO THE TRAINING COURSE:

Candidates who were admitted to an earlier course at the National Defence Academy, Indian Military Academy, Air Force Academy, Indian Naval Academy, Officers' Training Academy, Chennai but were removed there from on disciplinary ground will not be considered for admission to the Indian Military Academy, Indian Naval Academy, Air Force Academy or for grant of Short Service Commission in the Army.

Candidates who were previously withdrawn from the Indian Military Academy for lack of Officer-like qualities will not be admitted to the Indian Military Academy.

Candidates who were previously selected as Special Entry Naval Cadets but were withdrawn from the National Defence Academy or from Naval Training Establishments for lack of Officer-like qualities will not be eligible for admission to the Indian Navy.

Candidates who were withdrawn from Indian Military Academy, Officers' Training Academy, NCC and Graduate course for lack of Officer-like qualities will not be considered for grant of Short Service Commission in the Army.

Candidates who were previously withdrawn from the NCC and Graduates' course for lack of Officer-like qualities will not be admitted to the Indian Military Academy.

10. PUBLIC DISCLOSURE OF MARKS SCHEME

As per the decision taken by the Government for increasing the access of unemployed to job opportunities, the Commission will publically disclose the scores of the candidates (obtained in the Written Examination and SSB Interview/Personality Test) through the public portals. The disclosure will be made in respect of only those candidates who will appear in the SSB Interview for the Combined Defence Services Examination and are not qualified. The information shared through this disclosure scheme about the unsuccessful candidates may be used by other public and private recruitment agencies to appoint suitable candidates from the information made available in the public portal.

Candidates, who will appear for SSB, will be required to give their options when asked by the Commission. A candidate may opt out of the scheme also and in that case his/her details will not be published by the Commission.

Besides sharing of the information of the unqualified candidates of this CDS Examination, the Commission will not assume any responsibility or liability for the method and manner in which information related to candidates is utilized by other private or public organizations.

11. RESTRICTIONS ON MARRIAGE DURING TRAINING IN THE INDIAN MILITARY ACADEMY OR IN THE INDIAN NAVAL ACADEMY OR IN THE AIR FORCE ACADEMY OR OFFICERS TRAINING ACADEMY, CHENNAI:

Candidates for the Indian Military Academy Course or Naval Academy Course or Indian Air Force Academy Course or Officers' Training Academy, Chennai must undertake not to marry until they complete their full training. A candidate who marries subsequent to the date of his/her application though successful at this or any subsequent examination will not be selected for training. A candidate who marries during training shall be discharged and will be liable to refund all expenditure incurred on him/her by the Government.

Candidates must undertake not to marry until they complete their full training. A candidate who marries subsequent to the date of his application, through successful at the written examination or service Selection Board interview of medical examination will not be eligible for training. A

candidate who marries during this period, shall be discharged and will be liable to refund all expenditure incurred on him by the Government.

12. OTHER RESTRICTIONS DURING TRAINING IN THE INDIAN MILITARY ACADEMY OR IN THE INDIAN NAVAL ACADEMY OR IN THE AIR FORCE ACADEMY:

After admission to the Indian Military Academy or the Indian Naval Academy or the Air Force Academy, candidates will not be considered for any other commission. They will also not be permitted to appear for any interview or examination after they have been finally selected for training in the Indian Military Academy or the Indian Naval Academy or the Air Force Academy.

(J. K. Mandal)
Under Secretary (Exam)
Union Public Service Commission

APPENDIX-I

The scheme, standard and syllabus of the examination

A. SCHEME OF EXAMINATION

1. The Competitive examination comprises:

(a) Written examination as shown in para 2 below.

(b) Interview for intelligence and personality test (vide Part 'B' of this Appendix) of such candidates as may be called for interview at one of the Services Selection Centres.

2. The subjects of the written examination, the time allowed and the maximum marks allotted to each subject will be as follows:

(a) For Admission to Indian Military Academy, Indian Naval Academy and Air Force Academy:—

Subject	Code	Duration	Maximum Marks
1. English	11	2 Hours	100
2. General Knowledge	12	2 Hours	100
3. Elementary Mathematics	13	2 Hours	100

(b) For Admission to Officers' Training Academy :—

Subject	Code	Duration	Maximum Marks
1. English	11	2 Hours	100
2. General Knowledge	12	2 Hours	100

The maximum marks allotted to the written examination and to the interviews will be equal for each course i.e. the maximum marks allotted to the written examination and to the interviews will be 300, 300, 300 and 200 each for admission to the Indian Military Academy, Indian Naval Academy, Air Force Academy and Officers' Training Academy respectively.

3. The papers in all the subjects will consist of objective type questions only. The question papers (Test Booklets) of General Knowledge and Elementary Mathematics will be set bilingually in Hindi as well as English.

4. In the question papers, wherever necessary, questions involving the metric system of Weights and Measures only will be set.

5. Candidates must write the papers in their own hand. In no circumstances will they be allowed the help of a scribe to write answers for them.

6. The Commission have discretion to fix qualifying marks in any or all the subjects of the examination.

7. The candidates are not permitted to use calculator for answering objective type papers (Test Booklets). They should not therefore, bring the same inside the Examination Hall.

B. STANDARD AND SYLLABUS OF THE EXAMINATION

STANDARD

The standard of the papers in Elementary Mathematics will be of Matriculation level. The standard of papers in other subjects will approximately be such as may be expected of a graduate of an Indian University.

SYLLABUS

ENGLISH (Code No. 11)

The question paper will be designed to test the candidates' understanding of English and workmanlike use of words.

GENERAL KNOWLEDGE (Code No. 12)

General Knowledge including knowledge of current events and of such matters of everyday observation and experience in their scientific aspects as may be expected of an educated person who has not made a special study of any scientific subject. The paper will also include questions on History of India and Geography of a nature which candidate should be able to answer without special study.

ELEMENTARY MATHEMATICS (Code No. 13)

ARITHMETIC

Number System—Natural numbers, Integers, Rational and Real numbers. Fundamental operations, addition, subtraction, multiplication, division, Square roots, Decimal fractions. Unitary method, time and distance, time and work, percentages, applications to simple and compound interest, profit and loss, ratio and proportion, variation.

Elementary Number Theory—Division algorithm. Prime and composite numbers. Tests of divisibility by 2, 3, 4, 5, 9 and 11. Multiples and factors. Factorisation Theorem. H.C.F. and L.C.M. Euclidean algorithm. Logarithms to base 10, laws of logarithms, use of logarithmic tables.

ALGEBRA

Basic Operations, simple factors, Remainder Theorem, H.C.F., L.C.M., Theory of polynomials, solutions of quadratic equations, relation between its roots and coefficients (Only real roots to be considered). Simultaneous linear equations in two unknowns—analytical and graphical solutions. Simultaneous linear inequations in two variables and their solutions. Practical problems leading to two simultaneous linear equations or inequations in two variables or quadratic equations in one variable & their solutions. Set language and set notation, Rational expressions and conditional identities, Laws of indices.

TRIGONOMETRY

Sine $\times$, cosine $\times$, Tangent $\times$ when $0^\circ \leq \times \leq 90^\circ$ Values of $\sin \times$, $\cos \times$ and $\tan \times$, for $\times = 0^\circ, 30^\circ, 45^\circ, 60^\circ$ and 90°

Simple trigonometric identities.

Use of trigonometric tables.

Simple cases of heights and distances.

GEOMETRY

Lines and angles, Plane and plane figures, Theorems on (i) Properties of angles at a point, (ii) Parallel lines, (iii) Sides and angles of a triangle, (iv) Congruency of triangles, (v) Similar triangles, (vi) Concurrence of medians and altitudes, (vii) Properties of angles, sides and diagonals of a parallelogram, rectangle and square, (viii) Circles and its properties including tangents and normals, (ix) Loci.

MENSURATION

Areas of squares, rectangles, parallelograms, triangle and circle. Areas of figures which can be split up into these figures (Field Book), Surface area and volume of cuboids, lateral surface and volume of right circular cones and cylinders, surface area and volume of spheres.

STATISTICS

Collection and tabulation of statistical data, Graphical representation frequency polygons, histograms, bar charts, pie charts etc. Measures of central tendency.

INTELLIGENCE AND PERSONALITY TEST

The SSB procedure consists of two stage Selection process - stage I and stage II. Only those candidates who clear the stage I are permitted to appear for stage II. The details are:-

- (a) Stage I comprises of Officer Intelligence Rating (OIR) tests are Picture Perception* Description Test (PP&DT). The candidates will be shortlisted based on combination of performance in OIR Test and PP&DT.
- (b) Stage II Comprises of Interview, Group Testing Officer Tasks, Psychology Tests and the Conference. These tests are conducted over 4 days. The details of these tests are given on the website www.joinindianarmy.nic.in.

The personality of a candidate is assessed by three different assessors viz. The Interviewing Officer (IO), Group Testing Officer (GTO) and the Psychologist. There are no separate weightage for each test. The marks are allotted by assessors only after taking into consideration the performance of the candidate holistically in all the test. In addition, marks for Conference are also allotted based on the initial performance of the Candidate in the three techniques and decision of the Board. All these have equal weightage.

The various tests of IO, GTO and Psych are designed to bring out the presence/absence of Officer Like Qualities and their trainability in a candidate. Accordingly candidates are Recommended or Not Recommended at the SSB.

APPENDIX-II

Special Instructions to Candidates for objective type tests

1. Articles permitted inside Examination Hall

Clip board or hard board (on which nothing is written) a good quality Black Ball Pen for marking responses on the Answer Sheet. Answer Sheet and sheet for rough work will be supplied by the invigilator.

2. Articles not permitted inside Examination Hall

Do not bring into the Examination Hall any article other than those specified above e.g. any valuable/costly items, mobile phones, Smart/Digital watches other IT gadgets, books, bags, notes, loose sheets, electronic or any other type of calculators, mathematical and drawing instruments, Log Tables, stencils of maps, slide rules, Test Booklets and rough sheets pertaining to earlier session(s) etc.

Possession (even in Switch off mode)/use of Mobiles, phones, Bluetooth, pagers or any other communication devices or any other incriminating material (notes on e-admit card, papers, eraser etc.) are not allowed inside the premises where the examination is being conducted. Any infringement of these instructions shall entail disciplinary action including ban from future examinations.

Candidates are advised in their own interest not to bring any of the banned items including mobile phones/Bluetooth/pagers to the venue of the examination, as no arrangements for safekeeping will be made at the venue of the examination. Candidates are advised not to bring any valuable/costly items to the Examination Halls, as no arrangement for safe keeping of the same will be made at the venue of the examination. Commission will not be responsible for any loss in this regard.

3. Penalty for wrong Answers

THERE WILL BE PENALTY (NEGATIVE MARKING) FOR WRONG ANSWERS MARKED BY A CANDIDATE IN THE OBJECTIVE TYPE QUESTION PAPERS.

- (i) There are four alternatives for the answer to every question. For each question for which a wrong answer has been given by the candidate. **One third (0.33)** of the marks assigned to that question will be deducted as penalty.
- (ii) If a candidate given more than one answer, it will be treated as a wrong answer even if one of the given answers happens to be correct and there will be same penalty as above for that question.
- (iii) If a question is left blank i.e. no answer is given by the candidate, there will be **no penalty** for that question.

4. Unfair means strictly prohibited

No candidate shall copy from the papers of any other candidate nor permit his papers to be copied nor give nor attempt to give nor obtain nor attempt to obtain irregular assistance of any description.

5. Conduct in Examination Hall

No candidate should misbehave in any manner or create disorderly scene in the Examination Hall or harass the staff employed by the Commission for the conduct of the examination. Any such misconduct will be severely penalised.

6. Answer Sheet particulars

- (i) Write with Black ball pen your Centre and subject followed by test booklet series (in bracket), subject code and roll number at the appropriate space provided on the answer sheet at the top. Also encode your booklet series (A, B, C, or D as the case may be), subject code and roll number in the circles provided for the purpose in the answer sheet. The guidelines for writing the above particulars and for encoding the above particulars are given in Annexure. In case the booklet series is not printed on the test booklet or answer sheet is un-numbered, please report immediately to the invigilator and get the test booklet/answer sheet replaced.
 - (ii) Candidates should note that any omission/mistakes/discrepancy in encoding/filling of details in the OMR answer sheet, especially with regard to Roll Number and Test Booklet Series Code, will render the answer sheet liable for rejection.
 - (iii) Immediately after commencement of the examination please check that the test booklet supplied to you does not have any unprinted or torn or missing pages or items etc., if so, get it replaced by a complete test booklet of the same series and subject.
7. Do not write your name or anything other than the specific items of information asked for, on the answer sheet/test booklet/sheet for rough work.
 8. Do not fold or mutilate or damage or put any extraneous marking in the Answer Sheet. Do not write anything on the reverse of the answer sheet.
 9. Since the answer sheets will be evaluated on computerised machines, candidates should exercise due care in handling and filling up the answer sheets. **They should use black ball pen only to darken the circles. For writing in boxes, they should use black ball pen. Since the entries made by the candidates by darkening the circles will be taken into account while evaluating the answer sheets on computerised machines, they should make these entries very carefully and accurately.**

10. Method of marking answers

In the 'OBJECTIVE TYPE' of examination, you do not write the answers. For each question (hereinafter referred to as "Item") several suggested answers (hereinafter referred to as "Responses") are given. You have to choose one response to each item. The question paper will be in the Form of TEST BOOKLET. The booklet will contain item bearing numbers 1, 2, 3.....etc. Under each item, Responses marked (a), (b), (c), (d) will be given. Your task will be to choose the correct response. If you think there is more than one correct response, then choose what you consider the best response.

In any case, for each item you are to select only one response, if you select more than one response, your response will be considered wrong.

In the Answer Sheet, Serial Nos. From 1 to 160 are printed. Against each numbers, there are circles marked (a), (b), (c) and (d). After you have read each item in the Test Booklet and decided which one of the given responses is correct or the best. **You have to mark your response by completely blackening with black ball pen to indicate your response.** For example, if the correct answer to item 1 is (b), then the circle containing the letter (b) is to be completely blackened with black ball pen as shown below :- Example : (a) • (c) (d).

11. Candidates must write the papers in their own hand. In no circumstances will they be allowed the help of a scribe.

12. Entries in Scannable Attendance List.

Candidates are required to fill in the relevant particulars with **black ball pen** only against their columns in the Scannable Attendance List, as given below.

- Blacken the circle (P) under the column (Present/Absent)
- Blacken the relevant circle for Test Booklet Series
- Write Test Booklet Serial No.
- Write the Answer Sheet Serial No. and also blacken the Corresponding circles below.
- Append signature in the relevant column.

13. Please read and abide by the instructions on the cover of Test Booklet. If any candidate indulges in disorderly or improper conduct he will render himself liable for disciplinary action and/or imposition of a penalty as the Commission may deem fit.

ANNEXURE

How to fill in the Answer Sheet of objective type tests in the Examination Hall

Please follow these instructions very carefully. You may note that since the answer sheets are to be evaluated on machine, any violation of these instructions may result in reduction of your score for which you would yourself be responsible. Before you mark your responses on the Answer Sheet, you will have to fill in various particulars in it.

As soon as the candidate receives the Answer Sheet, he should check that it is numbered at the bottom. If it is found un-numbered he should at once get it replaced by a numbered one.

You will see from the Answer Sheet that you will have to fill in the top line, which reads thus:

केंद्र	विषय	विषय कोड		अनुक्रमांक	
Centre	Subject	S. Code		Roll Number	

If you are, say, appearing for the examination in Delhi Centre for the Mathematics Paper* and your Roll No. is 081276, and your test booklet series is 'A' you should fill in thus, using black ball pen.

केंद्र	विषय	विषय कोड		अनुक्रमांक	
Centre- Delhi	Subject- English	S.Code		Roll Number	

You should write with black ball pen the name of the centre and subject in English or Hindi

The test Booklet Series is indicated by Alphabets A, B, C or D at the top right hand corner of the Booklet.

Write your Roll Numbers exactly as it is in your e-Admit card with Black ball pen in the boxes provided for this purpose. Do not omit any zero(s) which may be there.

The next step is to find out the appropriate subject code from the Time Table. Now encode the Test Booklet Series, Subject Code and the Roll Number in the circles provided for this purpose. Do the encoding with Black Ball pen. The name of the Centre need not be encoded.

Writing and encoding of Test Booklet Series is to be done after receiving the Test Booklet and confirming the Booklet Series from the same. For Mathematics *subject paper of 'A' Test Booklet Series you have to encode the subject code, which is 01. Do it thus:

पुस्तिका क्रम (ए)
Booklet Series (A)



विषय
Subject

0

1



अनुक्रमांक
Roll Number

All that is required is to blacken completely the circle marked 'A' below the Booklet Series and below the subject code blacken completely the Circles for "0" (in the first vertical column) and "1" (in the second vertical column). You should then encode the Roll No.081276. Do it thus similarly:

Important : Please ensure that you have carefully encoded your subject. Test Booklet series and Roll Number:

*This is just illustrative and may not be relevant to your Examination.

0	8	1	2	7	6

APPENDIX-III

GUIDELINES WITH REGARD TO PHYSICAL STANDARDS FOR CANDIDATES FOR COMBINED DEFENCE SERVICES EXAMINATION.

ARMY

MEDICAL STANDARDS AND PROCEDURE OF MEDICAL EXAMINATION FOR OFFICER ENTRIES INTO ARMY

1. Aim:

Aim of this literature is to familiarize the general population on medical standards for enrolment of candidates into Army through various types of entries. This literature also serves the purpose of placing information in public domain as per the policy of Information Commission under RTI Act -2005

2. Introduction:

(a) The primary responsibility of the Armed Forces is defending territorial integrity of the nation. For this purpose Armed Forces should always be prepared for war. Armed

Forces personnel undergo rigorous training in preparation for war. Armed Forces also assist civil authorities if required whenever the need arises like in the case of disasters. To carry out such tasks Armed Forces requires candidates with robust mental and physical health. Such candidates should also be capable of withstanding rigorous stress and strain of service conditions to perform their military duties in adverse terrain and uncongenial climate incl sea and air, in remote areas, in austere conditions with no medical facilities. A medically unfit individual due to disease/disability can not only drain precious resources but can also jeopardize lives of other members of the team during operations. Therefore only medically fit candidates are selected who emerge fit to be trained for war.

(b) The Armed Forces Medical Services are responsible for ensuring selection of **‘Medically Fit’** individuals into the Armed Forces.

(c) All Armed Forces personnel regardless of occupational specialty, unit assignment, age or gender should have a basic level of general **‘Medical fitness’** when inducted into service. This basic level of fitness can then be used as a benchmark to train personnel for further physically demanding occupational specialties or unit assignments. This will enhance deployable combat readiness.

(d) Medical examinations are carried out meticulously by Armed Forces Medical Services Medical Officers. These Medical Officers are well oriented to specific working conditions of Armed Forces after undergoing basic military training. Medical examinations are finalized by the Board of Medical Officers. **The decision of the Medical Board is final. In case of any doubt about any disease/disability/injury/genetic disorder etc noticed during enrolment/ commissioning, the benefit of doubt will be given to State.**

Medical Standards.

3. Medical standards described in the following paragraphs are general guidelines. They are not exhaustive in view of the vast knowledge of disease. These standards are subject to change with advancement in the scientific knowledge and change in working conditions of Armed Forces due to introduction of new eqpt/trades. Such changes will be promulgated from time to time by policy letters by competent authorities. Medical Officers, Spl Medical Officers and Medical Boards will take appropriate decisions based on following guidelines and principles.

4. **To be deemed ‘Medically fit’, a candidate must be in good physical and mental health and free from any disease/syndrome/disability likely to interfere with the efficient performance of military duties in any terrain, climate, season incl. sea and air, in remote areas, in austere conditions with no medical aid. Candidate also should be free of medical conditions which require frequent visit to medical facilities and use of any aid / drugs.**

(a) It will, however, be ensured that candidate is in good health. There should be no evidence of weak constitution, imperfect development of any system, any congenital deformities/ diseases/syndrome or malformation.

(b) No swelling/s including tumours/cyst/swollen lymph node/s anywhere on the body. No sinus/es or fistula/e anywhere on the body.

(c) No hyper or hypo pigmentation or any other disease/syndrome/disability of the skin.

(d) No hernia anywhere on the body.

(e) No scars which can impair the functioning and cause significant disfigurement.

(f) No arterio-venous malformation anywhere in/on the body.

- (g) No malformation of the head and face including asymmetry, deformity from fracture or depression of the bones of the skull; or scars indicating old operative interference and malformation like sinuses and fistulae etc.
 - (h) No impairment of vision including colour perception and field of vision.
 - (j) No hearing impairment, deformities/disabilities in ears vestibule-cochlear system.
 - (k) No impediment of speech due to any aetiology.
 - (l) No disease/disability/ congenital anomaly/syndrome of the bones or cartilages of the nose, or palate, nasal polyps or disease of the naso-Pharynx, uvula and accessory sinuses. There should be no nasal deformity and no features of chronic tonsillitis.
 - (m) No disease /syndrome/disability of the throat, palate tonsils or gums or any disease or injury affecting the normal function of either mandibular joint.
 - (n) No disease /syndrome/disability of the heart and blood vessels incl congenital, genetic, organic incl hypertension, and conduction disorders.
 - (o) No evidence of pulmonary tuberculosis or previous history of this disease or any other disease /syndrome/disability chronic disease of the lungs and chest including allergies /immunological conditions, connective tissue disorders, musculoskeletal deformities of chest.
 - (p) No disease of the digestive system including any abnormality of the liver, pancreas incl endocrinal, congenital, hereditary or genetic diseases /syndromes and disabilities.
 - (q) No diseases/ syndrome/ disability of any endocrinal system, reticuloendothelial system.
 - (r) No diseases/ syndrome/ disability of genito-urinary system including malformations, atrophy/hypertrophy of any organ or gland.
 - (s) No active, latent or congenital venereal disease
 - (t) No history or evidence of mental disease, epilepsy, incontinence of urine or enuresis.
 - (u) No disease/deformity/syndrome of musculo-skeletal system and joints incl skull, spine and limbs.
 - (v) There is no congenital or hereditary disease/ syndrome/disability.
5. Psychological examinations will be carried out during SSB selection procedure. However, any abnormal traits noticed during medical examination will be a cause for rejection.
6. Based on the above mentioned guidelines usual medical conditions which lead to rejection are:-
- (a) Musculo-skeletal deformities of spine, chest and pelvis, limbs e.g. scoliosis, torticollis, kyphosis, deformities of vertebrae, ribs, sternum, clavicle, other bones of skeleton, mal-united fractures, deformed limbs, fingers, toes and congenital deformities of spine.
 - (b) Deformities of Limbs: Deformed limbs, toes and fingers, deformed joints like cubitus valgus, cubitus varus, knock knees, bow legs, hyper mobile joints, amputated toes or fingers and shortened limbs.
 - (c) Vision and eye: Myopia, hypermetropia, astigmatism, lesions of cornea, lens, retina, squint and ptosis.

(d) Hearing, ears, nose and throat: Sub standard hearing capability, lesions of pinna, tympanic membranes, middle ear, deviated nasal septum, and congenital abnormalities of lips, palate, peri-auricular sinuses and lymphadenitis/adenopathy of neck. Hearing capacity should be 610 cm for Conversational Voice and Forced Whispering for each ear.

(e) Dental conditions:-

(i) Incipient pathological conditions of the jaws, which are known to be progressive or recurrent.

(ii) Significant jaw discrepancies between upper and lower jaw which may hamper efficient mastication and/or speech will be a cause for rejection.

(iii) Symptomatic Temporo-Mandibular Joint clicking and tenderness. A mouth opening of less than 30 mm measured at the incisal edges, Dislocation of the TMJ on wide opening.

(iv) All potentially cancerous conditions.

(v) Clinical diagnosis for sub mucous fibrosis with or without restriction of mouth opening.

(vi) Poor oral health status in the form of gross visible calculus, periodontal pockets and/or bleeding from gums.

(vii) Loose teeth: More than two mobile teeth will render the candidate unfit.

(viii) Cosmetic or post-traumatic maxillofacial surgery/trauma will be UNFIT for at least 24 weeks from the date of surgery/injury whichever is later.

(ix) If malocclusion of teeth is hampering efficient mastication, maintenance of oral hygiene or general nutrition or performance of duties efficiently.

(f) Chest: Tuberculosis, or evidence of tuberculosis, lesions of lungs, heart, musculo skeletal lesions of chest wall.

(g) Abdomen and genitor-urinary system: Hernia, un-descended testis, varicocele, organomegaly, solitary kidney, horseshoe kidney & cysts in the kidney/liver, Gall bladder stones, renal and ureteric stones, lesions/deformities of urogenital organs, piles, sinuses and lymphadenitis/pathy.

(h) Nervous system: Tremors, speech impediment and imbalance.

(j) Skin: Vitiligo, haemangiomas, warts, corns, dermatitis, skin infections growths and hyperhydrosis.

7. **Height and Weight:** Height requirement varies as per the stream of entry. Weight should be proportionate to height as per the chart given below:-

Age (yrs)	Minimum weight for all ages	Age: 17 to 20 yrs	Age: 20+01 day - 30 yrs	Age: 30 + 01 day - 40 yrs	Age: Above 40 yrs
Height (cm)	Weight (Kg)	Weight (Kg)	Weight (Kg)	Weight (Kg)	Weight (Kg)
140	35.3	43.1	45.1	47.0	49.0
141	35.8	43.7	45.7	47.7	49.7
142	36.3	44.4	46.4	48.4	50.4
143	36.8	45.0	47.0	49.1	51.1

Age (yrs)	Minimum weight for all ages	Age: 17 to 20 yrs	Age: 20+01 day - 30 yrs	Age: 30 + 01 day - 40 yrs	Age: Above 40 yrs
Height (cm)	Weight (Kg)	Weight (Kg)	Weight (Kg)	Weight (Kg)	Weight (Kg)
144	37.3	45.6	47.7	49.8	51.8
145	37.8	46.3	48.4	50.5	52.6
146	38.4	46.9	49.0	51.2	53.3
147	38.9	47.5	49.7	51.9	54.0
148	39.4	48.2	50.4	52.6	54.8
149	40.0	48.8	51.1	53.3	55.5
150	40.5	49.5	51.8	54.0	56.3
151	41.0	50.2	52.4	54.7	57.0
152	41.6	50.8	53.1	55.4	57.8
153	42.1	51.5	53.8	56.2	58.5
154	42.7	52.2	54.5	56.9	59.3
155	43.2	52.9	55.3	57.7	60.1
156	43.8	53.5	56.0	58.4	60.8
157	44.4	54.2	56.7	59.2	61.6
158	44.9	54.9	57.4	59.9	62.4
159	45.5	55.6	58.1	60.7	63.2
160	46.1	56.3	58.9	61.4	64.0
161	46.7	57.0	59.6	62.2	64.8
162	47.2	57.7	60.4	63.0	65.6
163	47.8	58.5	61.1	63.8	66.4
164	48.4	59.2	61.9	64.6	67.2
165	49.0	59.9	62.6	65.3	68.1
166	49.6	60.6	63.4	66.1	68.9
167	50.2	61.4	64.1	66.9	69.7
168	50.8	62.1	64.9	67.7	70.6
169	51.4	62.8	65.7	68.5	71.4
170	52.0	63.6	66.5	69.4	72.3
171	52.6	64.3	67.3	70.2	73.1
172	53.3	65.1	68.0	71.0	74.0
173	53.9	65.8	68.8	71.8	74.8
174	54.5	66.6	69.6	72.7	75.7
175	55.1	67.4	70.4	73.5	76.6
176	55.8	68.1	71.2	74.3	77.4
177	56.4	68.9	72.1	75.2	78.3
178	57.0	69.7	72.9	76.0	79.2
179	57.7	70.5	73.7	76.9	80.1
180	58.3	71.3	74.5	77.8	81.0
181	59.0	72.1	75.4	78.6	81.9
182	59.6	72.9	76.2	79.5	82.8
183	60.3	73.7	77.0	80.4	83.7
184	60.9	74.5	77.9	81.3	84.6
185	61.6	75.3	78.7	82.1	85.6
186	62.3	76.1	79.6	83.0	86.5
187	62.9	76.9	80.4	83.9	87.4
188	63.6	77.8	81.3	84.8	88.4
189	64.3	78.6	82.2	85.7	89.3
190	65.0	79.4	83.0	86.6	90.3
191	65.7	80.3	83.9	87.6	91.2
192	66.4	81.1	84.8	88.5	92.2
193	67.0	81.9	85.7	89.4	93.1

Age (yrs)	Minimum weight for all ages	Age: 17 to 20 yrs	Age: 20+01 day - 30 yrs	Age: 30 + 01 day - 40 yrs	Age: Above 40 yrs
Height (cm)	Weight (Kg)	Weight (Kg)	Weight (Kg)	Weight (Kg)	Weight (Kg)
194	67.7	82.8	86.6	90.3	94.1
195	68.4	83.7	87.5	91.3	95.1
196	69.1	84.5	88.4	92.2	96.0
197	69.9	85.4	89.3	93.1	97.0
198	70.6	86.2	90.2	94.1	98.0
199	71.3	87.1	91.1	95.0	99.0
200	72.0	88.0	92.0	96.0	100.0
201	72.7	88.9	92.9	97.0	101.0
202	73.4	89.8	93.8	97.9	102.0
203	74.2	90.7	94.8	98.9	103.0
204	74.9	91.6	95.7	99.9	104.0
205	75.6	92.5	96.7	100.9	105.1
206	76.4	93.4	97.6	101.8	106.1
207	77.1	94.3	98.6	102.8	107.1
208	77.9	95.2	99.5	103.8	108.2
209	78.6	96.1	100.5	104.8	109.2
210	79.4	97.0	101.4	105.8	110.3

(a) Weight for height charts given above is for all categories of personnel. This chart is prepared based on the BMI. The chart specifies the minimum acceptable weight that candidates of a particular height must have. Weights below the minimum specified will not be acceptable in any case. The maximum acceptable weight of height has been specified in age wise categories. Weights higher than the acceptable limit will be acceptable only in the case of candidates with documented evidence of body building, wrestling, and boxing at the National level. In such cases the following criteria will have to be met.

- (i) Body Mass Index should be below 25.
- (ii) Waist Circumference should be less than 90 cm for males and 80 cm for females.
- (iii) All biochemical metabolic parameters should be within normal limits.

(b) The minimum height required for male candidates for entry into the Armed Forces is 157 cm or as decided by the respective recruiting agency. Gorkhas and candidates belonging to Hills of North Eastern region of India, Garhwal and Kumaon, will be accepted with a minimum height of 152 cm.

(c) The minimum height required for female candidates for entry into the Armed Forces is 152 cm. Gorkhas and candidates belonging to Hills of North Eastern region of India, Garhwal and Kumaon will be accepted with a minimum height of 148 cm.

8. Following investigations will be carried out for all officer entries and for pre-commission training academies. However examining medical officer/ medical board may ask for any other investigation deemed fit.

- (a) Complete haemogram
- (b) Urine RE
- (c) Chest X-ray
- (d) USG abdomen and Pelvis.

9. Certain standards vary depending on age and type entry viz stds for vision as follows:-

Parameter	Standards : 10+2 entries, NDA(Army), TES and equivalent	Graduate & equivalent entries: CDSE, IMA, OTA, UES, NCC,TGC & equivalent	Post graduate & equivalent entries: JAG, AEC , APS, RVC,TA, AMC, ADC, SL & equivalent
Uncorrected vision(max allowed)	6/36 & 6/36	6/60 & 6/60	3/60 & 3/60
BCVA	Rt 6/6 & Lt 6/6	Rt 6/6 & Lt 6/6	Rt 6/6 & Lt 6/6
Myopia	≤ -2.5 D Sph (including max astigmatism $\leq \pm 2.0$ D Cyl)	≤ -3.50 D Sph (including max astigmatism $\leq \pm 2.0$ D Cyl)	≤ -5.50 D Sph (including max astigmatism $\leq \pm 2.0$ D Cyl)
Hypermetropia	$\leq +2.5$ D Sph, (including max astigmatism $\leq \pm 2.0$ D Cyl)	$\leq +3.50$ D Sph (including max astigmatism $\leq \pm 2.0$ D Cyl)	$\leq +3.50$ D Sph (including max astigmatism $\leq \pm 2.0$ D Cyl)
Lasik/equivalent surgery	Not permitted	Permitted *	Permitted*
Colour perception	CP-II	CP-II	CP-II

***LASIK or Equivalent kerato-refractive procedure**

(a) Any candidate who has undergone any kerato-refractive procedure will have a certificate from the –centre where he/she has undergone the procedure, specifying the date and type of surgery.

Note: Absence of such a certificate will necessitate the Ophthalmologist to make a decision to reject the candidate with specific endorsement of “Unfit due to undocumented Visual Acuity corrective procedure”.

(b) In order to be made FIT, the following criteria will have to be met:

- (i) Age more than 20 yrs at the time of surgery
- (ii) Minimum 12 months post LASIK
- (iii) Central corneal thickness equal to or more than 450 μ
- (iv) Axial length by IOL Master equal to or less than 26 mm
- (v) Residual refraction of less than or equal to ± 1.0 D incl cylinder, (provided acceptable in the category applied for).
- (vi) Normal healthy retina.
- (vii) Corneal topography and ectasia markers can also be included as addl criteria.

Candidates who have undergone radial keratotomy are permanently unfit

10. Form to be used for med board proceedings is AFMSF-2A.

11. Procedure of Medical Examination Board: Medical Examination Board for selection for officers and pre-commissioning training academies are convened at designated Armed Forces Medical Services Hospitals near Service Selection Boards (SSB). These Medical Boards are termed as ‘Special Medical Board’ (SMB). Candidates who clear SSB interview are referred to Armed Forces Medical Services Hospital with identification documents. Staff Surgeon of Hospital will identify the candidate, guide the candidate to fill the relevant portions of the AFMSF-2, organize investigations and examination by Medical, Surgical, Eye, ENT, Dental specialists. Female candidates are examined by Gynaecology Specialist also. After examination by Specialists, the candidate is brought before

Medical Board. Medical Board once satisfied with findings of Specialists will declare fitness of candidate. If any candidate is declared 'Unfit' by SMB, such candidates can request for 'Appeal Medical Board' (AMB). Detailed procedure for AMB will be provided by President SMB.

12. Miscellaneous aspects:

- (a) Clinical methods of examinations are laid down by O/O DGAFMS.
- (b) Female candidates will be examined by female medical officers and specialists. In case of non-availability they will be examined by Medical Officer in the presence of female attendant.
- (c) Fitness following surgery: Candidates may be declared fit after surgery. However, there should not be any complication; scar should be healthy, well healed and attained required tensile strength. The candidate shall be considered fit after 01 year of open/laparoscopic surgeries for hernia and twelve weeks of laparoscopic abdominal surgery for cholecystectomy. For any other surgery, fitness shall be considered only after 12 weeks of the laparoscopic surgery and 12 months after an open surgery. Candidate shall be unfit for any surgeries for injuries, ligament tear, and meniscus tear of any joint, irrespective of duration of surgery.

NAVY

**MEDICAL STANDARD AND PROCEDURE OF MEDICAL EXAMINATION FOR
OFFICER ENTRIES INTO NAVY**

PROCEDURE ON CONDUCT OF MEDICAL BOARDS

1. A candidate recommended by the Services Selection Board (SSB) will undergo a medical examination (Special Medical Board) by a Board of Service Medical Officers. Only those candidates, who are declared fit by the Medical Board, will be admitted to the Academy. However, the President of the Medical Board will intimate the candidates declared unfit of their results and the procedure for an Appeal Medical Board (AMB) to be completed in a Command Hospital or equivalent within 42 days of Special Medical Board.

2. Candidates who are declared unfit by the Appeal Medical Board (AMB) may request for Review Medical board (RMB) within one day of completion of Appeal Medical Board. The President AMB will intimate about the procedure of challenging the findings of AMB. The candidates will also be intimated that sanction for holding of Review Medical Board (RMB) will be granted at the discretion of DGAFMS based on the merit of the case and that RMB is not a matter of right. The candidate should address the request for RMB if he/ she so desires to DMPR, Integrated Headquarters Ministry of Defence (Navy), Sena Bhawan, Rajaji Marg, New Delhi – 110011 and a copy of the same is handed over to the President of AMB. O/o DGAFMS will inform the date and place (Delhi and Pune only) where the candidate will appear for a RMB.

3. The following investigations will be carried out mandatorily during Special Medical Board. However, Medical Officer / Medical Board examining a candidate may ask for any other investigation as required or indicated :-

- (a) Complete Haemogram
- (b) Urine RE/ME
- (c) X Ray chest PA view
- (d) USG abdomen & pelvis
- (e) Liver Function Tests

- (f) Renal Function Tests
- (g) X Ray Lumbosacral spine, Anterior-Posterior and Lateral views
- (h) Electrocardiogram (ECG)

PHYSICAL STANDARDS FOR OFFICERS (MALE/ FEMALE) ON ENTRY

4. The candidate must be physically fit according to the prescribed physical standards.

(a) The candidate must be in good physical and mental health and free from any disease/ disability which is likely to interfere with the efficient performance of duties both ashore and afloat, under peace as well as war conditions in any part of the world.

(b) There should be no evidence of weak constitution, bodily defects or underweight. The candidate should not be overweight or obese.

5. **Weight**

Height-Weight Chart : Navy

Height in Mtrs	Up to 17 yrs		17 yrs + 1 day to 18 yrs		18 yrs + 1 day to 20 yrs		20 yrs + 1 day to 30 yrs		Above 30 yrs	
	Minimum Weight in Kg	Maximum Weight in Kg	Minimum Weight in Kg	Maximum Weight in Kg	Minimum Weight in Kg	Maximum Weight in Kg	Minimum Weight in Kg	Maximum Weight in Kg	Minimum Weight in Kg	Maximum Weight in Kg
1.47	37	45	40	45	40	48	40	50	40	52
1.48	37	46	41	46	41	48	41	50	41	53
1.49	38	47	41	47	41	49	41	51	41	53
1.5	38	47	42	47	42	50	42	52	42	54
1.51	39	48	42	48	42	50	42	52	42	55
1.52	39	49	43	49	43	51	43	53	43	55
1.53	40	49	43	49	43	51	43	54	43	56
1.54	40	50	44	50	44	52	44	55	44	57
1.55	41	50	44	50	44	53	44	55	44	58
1.56	41	51	45	51	45	54	45	56	45	58
1.57	42	52	46	52	46	54	46	57	46	59
1.58	42	52	46	52	46	55	46	57	46	60
1.59	43	53	47	53	47	56	47	58	47	61
1.6	44	54	47	54	47	56	47	59	47	61
1.61	44	54	48	54	48	57	48	60	48	62
1.62	45	55	49	55	49	58	49	60	49	63
1.63	45	56	49	56	49	58	49	61	49	64
1.64	46	56	50	56	50	59	50	62	50	65
1.65	46	57	50	57	50	60	50	63	50	65
1.66	47	58	51	58	51	61	51	63	51	66
1.67	47	59	52	59	52	61	52	64	52	67
1.68	48	59	52	59	52	62	52	65	52	68
1.69	49	60	53	60	53	63	53	66	53	69
1.7	49	61	53	61	53	64	53	66	53	69
1.71	50	61	54	61	54	64	54	67	54	70
1.72	50	62	55	62	55	65	55	68	55	71
1.73	51	63	55	63	55	66	55	69	55	72
1.74	51	64	56	64	56	67	56	70	56	73
1.75	52	64	57	64	57	67	57	70	57	74
1.76	53	65	57	65	57	68	57	71	57	74
1.77	53	66	58	66	58	69	58	72	58	75

Height in Mtrs	Up to 17 yrs		17 yrs + 1 day to 18 yrs		18 yrs + 1 day to 20 yrs		20 yrs + 1 day to 30 yrs		Above 30 yrs	
	Minimum Weight in Kg	Maximum Weight in Kg	Minimum Weight in Kg	Maximum Weight in Kg	Minimum Weight in Kg	Maximum Weight in Kg	Minimum Weight in Kg	Maximum Weight in Kg	Minimum Weight in Kg	Maximum Weight in Kg
1.78	54	67	59	67	59	70	59	73	59	76
1.79	54	67	59	67	59	70	59	74	59	77
1.8	55	68	60	68	60	71	60	75	60	78
1.81	56	69	61	69	61	72	61	75	61	79
1.82	56	70	61	70	61	73	61	76	61	79
1.83	57	70	62	70	62	74	62	77	62	80
1.84	58	71	63	71	63	74	63	78	63	81
1.85	58	72	63	72	63	75	63	79	63	82
1.86	59	73	64	73	64	76	64	80	64	83
1.87	59	73	65	73	65	77	65	80	65	84
1.88	60	74	65	74	65	78	65	81	65	85
1.89	61	75	66	75	66	79	66	82	66	86
1.9	61	76	67	76	67	79	67	83	67	87
1.91	62	77	67	77	67	80	67	84	67	88
1.92	63	77	68	77	68	81	68	85	68	88
1.93	63	78	69	78	69	82	69	86	69	89
1.94	64	79	70	79	70	83	70	87	70	90
1.95	65	80	70	80	70	84	70	87	70	91

Notes:-

(a) The minimum and maximum weight for height will be standard for all categories of personnel. Candidates with weight below the minimum specified will not be accepted.

(b) Male candidates with weight higher than specified will be acceptable only in exceptional circumstances in case of candidates with documented evidence of body building, wrestling, boxing or muscular build. In such cases, the following criteria are to be met :-

(i) Body Mass Index should not be more than 25.

(ii) Waist : Hip Ratio less than 0.9.

(iii) All biochemical parameters such as blood sugar Fasting and PP, blood urea, creatinine, cholesterol, HbA1C%, etc are within normal limits.

(c) The fitness can only be given by a Medical Specialist.

(d) The minimum acceptable height is 157 cms. However, relaxation in height is permissible to candidates holding domicile of areas as mentioned below and talented sports male candidates:-

Sl No	Category	Minimum Height for Male Candidates
(i)	Tribals from Ladhakh Region	155 Cm
(ii)	Andaman & Nicobar, Lakshdweep and Minicoy Islands	155 Cm
(iii)	Gorkhas, Nepali, Assamese, Garhwali, Kumaoni and Uttarakhand	152 Cm

(iv)	Bhutan, Sikkim & North East Region	152 Cm
(v)	Extra talented sports candidates	155 Cm

6. During the medical examination of candidates, the following principal points will be ensured:-

- (a) The candidate is sufficiently intelligent.
- (b) The hearing is good and that there is no sign of any disease of ear, nose or throat.
- (c) Vision in either eye is up to the required standard. His/ her eyes are bright, clear and with no obvious squint or abnormality. Movements of eye balls should be full and free in all directions.
- (d) Speech is without impediment.
- (e) There is no glandular swelling.
- (f) Chest is well formed and that his/her heart and lungs are sound.
- (g) Limbs of the candidates are well formed and fully developed.
- (h) There is no evidence of hernia of any degree or form.
- (j) There is free and perfect action of all the joints.
- (k) Feet and toes are well formed.
- (l) Absence of any congenital malformation or defects.
- (m) He/she does not bear traces of previous acute or chronic disease pointing to an impaired constitution.
- (n) Presence of sufficient number of sound teeth for efficient mastication.
- (p) Absence of any disease of the Genito-Urinary tract.

7. Major defects for rejection are as under:-

- (a) Weak constitution, imperfect development, congenital malformation, muscular wasting.
- (b) Malformation of the head including deformity from fracture or depression of the bones of the skull.
- (c) Assessment of Scoliosis. Idiopathic Scoliosis upto 10 degrees for Lumbar Spine and 15 degrees of Dorsal Spine will be acceptable provided.
 - (i) Individual is asymptomatic
 - (ii) No history of trauma to spine
 - (iii) No chest asymmetry/ shoulder imbalance or pelvic obliquity in the lumbar spine.
 - (iv) There is no neurological deficit
 - (v) No congenital anomaly of the spine

- (vi) There is absence of syndromic features
 - (vii) ECG is normal
 - (viii) No deformity exists on full flexion of the spine
 - (ix) No restriction of range of movements
 - (x) No organic defect causing structural abnormality
- (d) Skeletal deformity either hereditary or acquired and disease or impairment of function of bones or joints.

Note:- Rudimentary cervical rib causing no signs or symptoms is acceptable.

- (e) Asymmetry of torso or limbs, abnormality of locomotion including amputation.
- (f) Deformity of feet and toes.
 - (i) **Hyperextensible Finger Joints.** All candidates shall be thoroughly examined for hyper-extensible finger joints. Any extension of fingers bending backwards beyond 90 degrees shall be considered hyper-extensible and considered unfit. Other joints like Knee, Elbow, Spine and Thumb shall also be examined carefully for features of hyper laxity/ hypermobility. Although the individual may not show features of hyper laxity in other joints, isolated presentation of hyper extensibility of finger joints shall be considered unfit because of the various ailments that may manifest later if such candidates are subjected to strenuous physical training as mentioned above.
 - (ii) **Mallet Finger.** Loss of extensor mechanism at the distal inter-phalangeal joint leads to Mallet finger. Chronic mallet deformity can lead to secondary changes in the PIP and MCP joint which can result in compromised hand function. Normal range of movement at DIP joints is 0-80 degree and PIP joint is 0-90 degrees in both flexion and extension. In Mallet finger, candidate unable to extend/ straighten distal phalanx of fingers completely.
 - (aa) Candidates with mild condition i.e., less than 10 degrees of extension lag without any evidence of trauma, pressure symptoms and any functional deficit should be declared Fit.
 - (ab) Candidates with fixed deformity of fingers will be declared Unfit.
 - (iii) **Polydactyly.** Can be assessed for fitness 12 weeks post-op. Can be declared fit if there is no bony abnormality (X-Ray), wound is well healed and scar is supple and there is no evidence of neuroma on clinical examination.
 - (iv) **Simple Syndactyly.** Can be assessed for fitness 12 weeks post op. Can be declared fit if there is no bony abnormality (X-Ray), wound is well healed and scar is supple and webspace is satisfactory.
 - (v) **Complex Syndactyly.** Unfit
 - (vi) **Polymazia.** Candidates to be considered fit after 12 weeks of post operative period if there is no post operative complication with a well healed surgical wound and no residual disease.
 - (vii) **Hyperostosis Frontalis Interna.** Will be considered fit in the absence of any other metabolic abnormality.

(viii) **Healed Fractures.**

(aa) All intra-articular fractures especially of major joints (Shoulder, elbow, wrist, hip, knee and ankle) with or without surgery, with or without implant shall be considered unfit.

(ab) All extra-articular fractures with post-operative implant insitu shall be considered unfit and will be considered for fitness after minimum of 12 weeks of implant removal.

(ac) Nine (09) months will be the minimum duration for considering evaluation following extra-articular injuries of all long bones (both upper and lower limbs) post injury which have been managed conservatively. Individual will be considered fit if there is:-

- (i) No evidence of mal-alignment/mal-union
- (ii) No neuro-vascular deficit
- (iii) No soft tissue loss
- (iv) No functional deficit
- (v) No evidence of osteomyelitis/ sequestra formation

(viii) **Cubitus Recurvatum.** >10 degrees is Unfit

(ix) **Cubitus Valgus.**

(aa) **Measurement of Carrying Angle.** The carrying angle at the elbow is assessed conventionally with the elbow in full extension using a protractor goniometer to measure the axes from the surface margin of the arm and forearm. However, variations in the development of the soft tissues in the arm and forearm generally lead to inconsistencies in the measured results. So far, there is no uniform method to measure the carrying angle of the elbow. However, measuring the carrying angle of the elbow through identification of bony landmarks on the acromion, medial and lateral epicondyles of the humerus, and the distal radial and ulnar styloid processes is recommended. Carrying angle is measured by a manual goniometer with two drawing axes of the arm and forearm. The axis of the arm is defined by the lateral border of the cranial surface of the acromion to the midpoint of the lateral and medial epicondyles of the humerus. The axis of the forearm is defined by the midpoint of the lateral and medial epicondyles of the humerus to the midpoint of the distal radial and ulnar styloid processes.

(ab) Cubitus valgus should be primarily a clinical diagnosis. The suggested indications to perform a radiographic evaluation include:-

- (i) History of trauma
- (ii) Scar around elbow
- (iii) Asymmetry of angles
- (iv) Distal neurovascular deficit
- (v) Restricted range of motion
- (vi) If deemed necessary by Orthopaedic Surgeon

(x) **Hyperextension at Elbow Joint.** Individuals can have naturally hyperextended elbow. This condition is not a medical problem, but can be a cause of fracture or chronic pain especially considering the stress and strains military population is involved in. Also, the inability to return the elbow to within 10 degrees of the neutral position is impairment in the activities of daily living.

(aa) Measurement modality. Measured using a Goniometer

(ab) Normal elbow extension is 0 degrees. Up to 10 degrees of hyperextension is within normal limits if the patient has no history of trauma to the joint. Anyone with hyperextension more than 10 degree should be unfit.

8. ***Eye.***

- (a) Deformity or morbid condition of the eye or eyelids that is liable for aggravation or recurrence.
- (b) Manifest squint of any degree.
- (c) Active trachoma or its complication or sequelae.
- (d) Visual acuity below prescribed standards.

Notes:-

1. Visual standards for CDSE entry are as follows :-

Criteria	CDSE
Uncorrected Vision	6/12 6/12
Corrected Vision	6/6 6/6
Limits of Myopia	-1.0D Sph
Limits of Hypermetropia	+ 2.0D Cyl
Astigmatism (within limits of myopia and hypermetropia)	±1.0D Sph / Cyl
Binocular Vision	III
Colour Perception	CP Pass *

* Colour Perception defect will be assessed by combination of Ishihara and Anomaloscope/MLT test during SMB. Ishihara and Anomaloscope (MLT if available) will be used during AMB. Ishihara and Anomaloscope and MLT will be used during RMB for confirmation, as applicable.

2. **Kerato Refractive Surgery.** Keratometry will be performed for candidates at SMB for detecting undeclared refracto-corrective procedures like PRK/LASIK/SMILE, etc. Values for the same will be endorsed in SMB. Candidates who have undergone any Refractory Surgery (PRK/LASIK/SMILE) can be considered fit in all branches (except submarine, diving and MARCO cadre) subject to the following conditions:-

(a) Surgery should not have been carried out before 20 yrs of age.

(b) Uncomplicated surgery at least 12 months before examination (Certificate mentioning the type of refractive surgery, date of surgery and pre-operative refractive error from concerned eye centre is to be produced by the candidate at the time of recruitment medical examination).

Post LASIK Standards. Candidate will be considered Fit if Axial Length by IOL Master is equal to or less than 26 mm by IOL Master or A Scan and Central Corneal Thickness by is Pachymeter equal to or more than 450 microns

- (c) Residual refraction less than or equal to ± 1.0 D Sph or Cyl, provided within the permissible limit for the category applied for. However, for Pilot and Observer entries, the residual refraction should be nil.
- (d) Pre-operative refractive error not more than ± 6.0 D
- (e) Normal retinal examination.

3. Kerato-Refractory Surgery (PRK, LASIK, SMILE) is not acceptable for special cadres such as submarine, diving and MARCO. Candidates who have undergone Radial Keratotomy are permanently unfit for all branches.

(i) **Ptosis**. Candidate will be considered fit post-operative provided there is no recurrence one year after surgery, visual axis is clear with normal visual fields and upper eyelid is 02 mm below the superior limbus. Candidates, who have not undergone surgery for the condition, would be considered fit if they meet any of the following criteria:-

- (aa) Mild ptosis
- (ab) Clear visual axis
- (ac) Normal visual field
- (ad) No sign of aberrant degeneration/ head tilt

(ii) **Exotropia**. Unfit

(iii) **Anisocoria**. If size difference between the pupils is >01 mm, candidate will be considered unfit.

(iv) **Heterochromia Iridum**. Unfit

(v) **Sphincter Tears**. Can be considered fit if size difference between pupils is <01 mm, pupillary reflexes are brisk with no observed pathology in cornea, lens or retina.

(vi) **Pseudophakia**. Unfit

(vii) **Lenticular Opacities**. Any lenticular opacity causing visual deterioration, or is in the visual axis or is present in an area of 07 mm around the pupils, which may cause glare phenomenon, should be considered Unfit. The propensity of the opacities not to increase in size or number should also be a consideration when deciding fitness. Small stationary lenticular opacities in the periphery like congenital blue dot cataract, not affecting the visual axis/ visual field may be considered by specialist (Should be less than 10 in number and central area of 04 mm to be clear).

(viii) **Optic Nerve Drusen**. Unfit

(ix) **High Cup Disc Ratio**. Candidates will be declared unfit if any of the following conditions exist:-

- (aa) Inner eye symmetry in cup disc ratio is > 0.2 .
- (ab) Retinal Nerve Fibre Layer defect seen by RNFL analysis on OCT.
- (ac) Visual field defect by Visual Field Analyser.

(x) **Keratoconus**. Unfit

(xi) **Lattice.**

(aa) The following lattice degenerations will render a candidate Unfit:-

- (i) Single circumferential lattice extending more than two clock hours in either or both eyes.
- (ii) Two circumferential lattices each more than one clock hour in extent in either or both eyes.
- (iii) Radial lattices.
- (iv) Any lattice with atrophic hole/ flap tears (Unlasered).
- (v) Lattice degenerations posterior to equator.

(ab) Candidates with lattice degeneration will be considered Fit under the following conditions:-

- (i) Single circumferential lattice without holes of less than two clock hours in either or both eyes.
- (ii) Two circumferential lattices without holes each being less than one clock hour in extent in either or both eyes.
- (iii) Post Laser delimitation single circumferential lattice, without holes/ flap tear, less than two clock hours extent in either or both eyes.
- (iv) Post Laser delimitation two circumferential lattices, without holes/ flap tear, each being less than one clock hour extent in either or both eyes.

9. ***Ear, Nose and Throat.***

(a) ***Ear.*** History or recurrent ear ache, tinnitus or vertigo, impairment of hearing, disease of the external meatus including atresia, exostosis or neoplasm which prevent a thorough examination of the drum, unhealed perforation of the tympanic membrane, aural discharge or sign of acute or chronic suppurative otitis media, evidence of radical or modified radical mastoid operation.

Notes:-

1. A candidate should be able to hear forced whisper at a distance of 610cms with each ear separately with back to the examiner.
2. Otitis Media. Current Otitis Media of any type will entail rejection. Evidence of healed chronic otitis media in the form of tympanosclerosis/ scarred tympanic membrane affecting less than 50% of Pars Tensa of tympanic membrane will be assessed by ENT Specialist and will be acceptable if Pure Tone Audiometry (PTA) and Tympanometry are normal. **All cases of Tympanoplasty and Myringoplasty/Myringotomy for choronic Otitis Media will entail permanent rejection.**

(i) The fwg conditions would render a candidate Unfit:-

- (aa) Residual perforation
- (ab) Residual hearing loss on Free Field Hearing and/or PTA

(ac) Any other type of tympanoplasty (other than Type 1 Tympanoplasty) or middle ear surgery (including ossiculoplasty, stapedotomy, canal wall down mastoidectomy, atticotomy, attico-antrotomy etc)

(ad) Any implanted hearing device (eg. cochlear implant, bone conduction implant, middle ear implants etc).

(b) **Bony Growth of External Auditory Canal.** Any candidate with clinically evident bony growth of external auditory canal like exostosis, osteoma, fibrous dysplasia etc. will be declared Unfit. Assessment of operated cases will be done after minimum period of 4 weeks. Post-surgery histopathology report and HRCT temporal bone will be mandatory. If the histo-pathological report is suggestive of a neoplasia or HRCT temporal bone is suggestive of partial removal or deep extension it would entail rejection.

(c) ***Nose.*** Disease of the bones or cartilages of the nose, marked nasal allergy, nasal polyps, atrophic rhinitis, disease of the accessory sinuses and nasopharynx.

Septal Perforation. Nasal septal perforation can be anterior cartilaginous or posterior bony perforation. Any septal perforation greater than 01 cm in the greatest dimension is a ground for rejection. A septal perforation which is associated with nasal deformity, nasal crusting, epistaxis and granulation irrespective of the size is a ground for rejection.

Nasal Polyposis. It is also known as Chronic Rhinosinusitis with polyposis (CRSwNP). Nasal polyposis is mostly associated with allergy, asthma, sensitivity to NSAIDs and infection i.e. bacterial and fungal. Most of these patients have high chances of recurrence and require long term management with nasal/ oral steroids and are unfit for extremes of climate and temperature conditions. Any individual detected to have nasal polyposis on examination or with history of having undergone surgery for nasal polyposis will be rejected.

(d) ***Throat.*** Disease of throat palate, tongue, tonsils, gums and disease or injury affecting the normal function of either mandibular joints.

Note: Simple hypertrophy of the tonsils without associated history of attacks of tonsillitis is acceptable.

(e) ***Disease of the larynx and impediment of speech.*** Voice should be normal. Candidates with pronounced stammer will not be accepted.

10. ***Dental Condition.*** It should be ensured that a sufficient number of natural and sound teeth are present for efficient mastication.

(a) A candidate must have a minimum of 14 dental points to be acceptable in order to assess the dental condition of an individual. Dental points less than 14 are a cause of rejection. The dental points are allotted as under for teeth in good opposition with corresponding teeth in the other jaw:-

(i) Central incisor, lateral incisor, canine, 1st Premolar, 2nd Premolar and under developed third molar with 1 point each.

(ii) 1st molar and 2nd molar and fully developed 3rd molar with 2 points each.

(iii) When all 32 teeth are present, there will be a total count of 22 or 20 points according to whether the third molars are well developed or not.

(b) The following teeth in good functional apposition must be present in each jaw:-

(i) Any 4 of the 6 anteriors.

- (ii) Any 6 of the 10 posteriors.

All these teeth must be sound/ repairable.

(c) Candidates suffering from severe pyorrhea will be rejected. Where the state of pyorrhea is such that in the opinion of the Dental Officer, it can be cured without extraction of teeth, the candidates may be accepted. A note about the affected teeth is to be inserted by the Medical/ Dental Officer in the medical documents.

- (d) Artificial dentures are not to be included while counting the dental points.

11. **Neck.**

- (a) Enlarged glands, tubercular or due to other diseases in the neck or other parts of the body.

Note:- Scars of operations for the removal of tubercular glands are not a cause for rejection provided there has been no active disease within the preceding five years and the chest is clinically and radiologically clear.

- (b) Disease of the thyroid gland.

12. **Chest.** The following are criteria for rejection:-

- (a) Deformity of chest, congenital or acquired.
- (b) Expansion less than 5 cms.
- (c) Significant bilateral/ unilateral Gynaecomastia in male. Candidates to be considered fit after 12 weeks op post operative period if:
 - (i) There is a well healed surgical wound with no residual disease
 - (ii) No post operative complication.
 - (iii) Surgical scar should be sufficiently matured and unlikely to cause any problems during military training,
 - (iv) Normal general physical examination
 - (v) Endocrine workup is normal

13. **Skin and Sexually Transmitted Infection (STI).**

- (a) Skin disease unless temporary or trivial.
- (b) Scars which by their extent or position cause or are likely to cause disability/ or marked disfigurement.
- (c) Hyperhydrosis - Palmar, plantar or axillary.
- (d) Congenital, active or latent sexually transmitted diseases.

Note:- In cases with old healed scar over the groin or penis/ vagina suggestive of past STI, blood will be tested for STI (Including HIV) to exclude latent Sexually Transmitted Disease.

14. **Respiratory System.**

- (a) History of chronic cough or Bronchial Asthma.
- (b) Evidence of pulmonary Tuberculosis.
- (c) Evidence of diseases of bronchi, lungs or pleurae detected on radiological examination of the chest will disqualify the candidate.

Note:- An X-Ray examination of the chest will be carried out under following circumstances:-

- (i) On entry into the service as a cadet or direct entry.
- (ii) At the time of grant of permanent commission in case of short service commissioned officer.

15. **Cardio-Vascular System.**

- (a) Functional or organic disease of the heart or blood vessels, presence of murmurs or clicks on auscultation.
- (b) Tachycardia (Pulse Rate persistently over 96/min at rest), bradycardia (Pulse Rate persistently below 40/ min at rest), any abnormality of peripheral pulse.
- (c) **Blood Pressure.** Candidate with Blood Pressure consistently greater than 140/90mm Hg will be rejected. All such candidates shall undergo a 24 hour Ambulatory Blood Pressure Monitoring (24 h ABPM) to differentiate between white coat hypertension and persistent hypertension. Wherever feasible, candidates will be evaluated by a Cardiologist at AMB. Those with normal 24 h ABPM and without any target organ damage can be considered fit after evaluation by a cardiologist.
- (d) **Electrocardiogram (ECG).** Any ECG abnormality detected at SMB will be a ground for rejection. Such candidates will be evaluated by a cardiologist during AMB with echocardiography for structural abnormality and stress test if deemed necessary. Benign ECG abnormalities like incomplete RBBB, T wave inversion in inferior leads, T inversion in V1-V3 (persistent juvenile pattern), LVH by voltage criteria (due to thin chest wall) may exist without any structural heart disease. Echocardiography should be performed in all such cases to rule out an underlying structural heart disease and opinion of Senior Adviser (Medicine)/ Cardiologist should be obtained. If echocardiography and stress tests (if indicated) are normal, the individual can be considered fit.

16. **Abdomen.**

- (a) Evidence of any disease of the gastro-intestinal tract, enlargement of liver, gall bladder or spleen, tenderness on abdominal palpation, evidence/ history of peptic ulcer or previous history of extensive abdominal surgery. All officer entry candidates are to be subjected to the Ultra Sound Examination of the abdominal and pelvic organs for detecting any abnormalities of the internal organs.
- (b) Hyperbilirubinemia of any nature is Unfit except for Unconjugated Hyperbilirubinemia where genetic studies confirm Gilbert's Syndrome as the etiological factor meeting criteria fulfilled below:-
 - (i) Unconjugated Hyperbilirubinemia with Total Serum Bilirubin < 3mg/dl, normal transaminases, PT/INR and Albumin.
 - (ii) HBs Ag and Anti HCV should be negative.

(iii) No abnormality on PBS, Reticulocyte count, lactate dehydrogenase levels, (LDH), Vit B12 and Hb electrophoresis.

(iv) Normal Ultrasonogram of the liver and FIBROSCAN.

(v) Diagnosis of Gilbert's Syndrome by genetic analysis of UGT1A1 gene.

(c) **Post-op Assessment.** Post-op duration for assessment of fitness in common conditions:-

(i) **Hernia.** Those who have been operated for hernia may be declared fit provided:-

(aa) 24 weeks have elapsed since the operation for Anterior Abdominal Wall hernia. Documentary proof to this effect is to be produced by the candidate.

(ab) General tone of the abdominal musculature is good.

(ac) There has been no recurrence of hernia or any complication connected with the operation.

(ii) **Other Conditions.** Those who have been operated for below mentioned conditions may be declared fit provided:-

(aa) Open Cholecystectomy. 24 weeks (In the absence of Incisional Hernia)

(ab) Laparoscopic Cholecystectomy. 08 weeks (Normal LFT, Normal histopathology).

(ac) Appendicectomy.

(i) **Laparoscopic Appendectomy** will be assessed for post operative fitness after a minimum period of 04 weeks. Candidates will be considered fit if:-

(aa) Post site scars have healed well

(ab) Scars are supple

(ac) Histo-pathological report of acute appendicitis is available

(ad) USG confirmation of absence of port site incisional hernia

(ii) **Open Appendectomy with muscle split approach** will be assessed for post op fitness after a minimum period **12 weeks**. Candidates will be considered fit if:-

(aa) Wound has healed well

(ab) Scar is supple and non tender

(ac) Histo-pathological report of acute appendicitis is available

(ad) USG confirmation of absence of surgical site incisional hernia

(iii) **Open Appendectomy with muscle cut approach** will be assessed for post op fitness after a minimum period **06 months**. Candidates will be considered fit if:-

(aa) Wound has healed well

(ab) scar is supple and non tender

(ac) Histo-pathological report of acute appendicitis is available

(ad) USG confirmation of absence of surgical site incisional

(ad) Pilonidal Sinus. 12 weeks

(ae) Fistula-in-Ano, Anal Fissure and Grade IV Hemorrhoids. 12 weeks post-op with satisfactory treatment and recovery.

- (af) Hydrocele and Varicocele. 08 weeks post-op with satisfactory treatment and recovery.
- (ag) Urachal cyst. 08 weeks post-op with satisfactory treatment and absence of any remnant.
- (ah) Fistula in anus, anal fissures and Hemorrhoids unless satisfactory to treatment has been carried out.

(d) **Hepatic Calcification**

(I) FIT:-

- (aa) Solitary calcification ≤ 3 cm or Multiple pin point or small calcification up to 5 in number and not involving more than 2 contiguous segments of liver. Cluster with total diameter not exceeding 3 cm along with no symptoms (Pain, Fever, Wt loss)
- (ab) No history/features of TB, parasitic infections, or chronic liver disease.
- (ac) No other organ involvement (e.g., lung/ Spleen calcifications).
- (ad) Benign imaging features (smooth, well-defined, no mass effect)
- (ae) Normal Serum Calcium, AFP, Serum Calcium, IGRA and Hydatid serology and any other clinically relevant test as per Physician discretion.

(II) UNFIT:-

- (aa) Solitary size > 3 cm.
- (ab) Multiple calcification or cluster size > 3 cm
- (ac) Calcification within a mass (irregular, enhancing, or necrotic appearance).
- (ad) Active Cystic lesion with wall/daughter cyst calcifications with positive hydatid serology).
- (ae) Associated findings (e.g., liver abscess, biliary obstruction, vascular aneurysm).
- (af) Active TB/fungal infection (e.g., lung/spleen calcifications + symptoms).
- (ag) Abnormal Serum Calcium levels.
- (ah) Relevant laboratory tests to be done on case-to-case basis as per Physician discretion.

(e) **Hepatic Hemangioma**

(i) FIT:-

- (aa) Solitary Hemangioma in liver upto size of ≤ 2.5 cm along with normal echotexture of liver and normal values of PT/INR, Platelets, Alpha Feto Protein and PIVKA or DCP in select cases.

(ii) UNFIT:-

- (aa) Hemangioma greater than 2.5 cm
- (ab) Multiple Hemangiomas
- (ac) Atypical Hemangioma (Radiological diagnosis on CT Scan) of any size
- (ad) Subcapsular Haemangioma of any size or number
- (ae) Any size or number of Haemangioma in spleen

(f) **Splenic Calcification and SOL**

(i) FIT:-

- (aa) Solitary calcification ≤ 2 cm or Multiple with total size not exceeding 2cm along with No symptoms (pain,fever,weight loss)

- (ab) No history/features of TB, parasitic infections, or chronic liver diseases
- (ac) No other organ involvement (e.g., lung/liver calcifications)
- (ad) Benign imaging features (smooth, well-defined, no mass effect)
- (ae) Normal IGRA, Hb electrophoresis, Vasculitic work up and Hydatid serology and any other clinically relevant test as per Physician discretion

(ii) UNFIT:-

- (aa) Solitary Size > 2cm
- (ab) Multiple calcification or cluster size >2cm
- (ac) Calcification within a mass (irregular, enhancing, or necrotic appearance)
- (ad) Active Cystic lesion with wall/daughter cyst calcifications with positive hydatid serology)
- (ae) Associated finding (e.g., splenic abscess, biliary obstruction, vascular aneurysm)
- (af) Active TB/fungal infection
- (ag) Relevant laboratory tests to be done on case-to-case basis as per Physician discretion.

- (g) **Agenesis of Gall Bladder**. Will be considered fit in the absence of any other abnormality of the biliary tract. MRCP will be done for all such cases.

17. **Genito-Urinary System.**

- (a) Any evidence of disease of genital organs.
- (b) Bilateral undescended testis, unilateral undescended testis retained in the inguinal canal or at the external abdominal ring unless corrected by operation.

Note:- Absence of one testis is not a cause for rejection unless the testis has been removed on account of disease or its absence has affected the physical or mental health of the candidate.

- (c) Disease or malformation of the kidneys or urethra.
- (d) Incontinence of urine and nocturnal enuresis.
- (e) Any abnormality on examination of urine including albuminuria or glycosuria.
- (f) The following are criteria for rejection:-
 - (aa) Renal Calculi. Irrespective of size, numbers, obstructive or non-obstructive. History of renal calculi (History or radiological evidence) will render a candidate Unfit.
 - (ab) Calycecdasis
 - (ac) Bladder Diverticulum
 - (ad) Simple Renal Cyst. > 1.5Cm

18. **Central Nervous System.**

- (a) Organic disease of Central Nervous System.
- (b) Tremors.
- (c) Candidates with history of fits and recurrent attacks of headache/ migraine will not be accepted.

19. **Psychiatric Disorders.** History or evidence of mental disease or nervous instability in the candidate or his family.

20. Block Vertebrae

(a) FIT:-

(i) Single level Complete Block Vertebra of Dorsal spine be considered Medically Fit.

(ii) Fit in absence of any neuro-deficiency/anomaly.

(b) UNFIT:-

(i) Complete/Incomplete Blocked Cervical Vertebrae

(ii) Blocked dorsal vertebrae at more than one level.

Lab Investigation (Hematology).

(a) **Polycythemia.** Hemoglobin more than 16.5g/dL in males and more than 16g/dL in females will be considered as Polycythemia and deemed Unfit.

(b) **Monocytosis.** Absolute monocyte counts greater than 1000/cu mm or more than or equal to 10% of total WBC counts is to be deemed Unfit.

(c) **Eosinophilia.** Absolute eosinophil counts greater than or equal to 500/ cu mm is deemed Unfit.

21. **Acceptable Defects on Entry.** Candidates for the Navy with the following minor defects may be accepted. These defects are however to be noted in the medical forms on entry.

(a) Knock Knees with a separation of less than 5 cm at the internal malleoli.

(b) Mild curvature of legs not affecting walking or running. Intercondylar distance should not be over 7 cm.

(c) Mild stammering not affecting expression.

(d) Mild degree of varicocele.

(e) Mild degree of varicose veins.

Note:- Remedial operations wherever required are to be performed prior to entry. No guarantee is given about ultimate acceptance and it should be clearly understood by a candidate that the decision whether an operation is desirable or necessary is one to be made by their private medical advisor. The Government will accept no liability regarding the result of operation or any expenses incurred.

(f) Any other slight defect which produces no functional disability and which in the opinion of medical officer/ medical board will not interfere with the individual's efficiency as an officer.

**MEDICAL STANDARD AND PROCEDURE OF MEDICAL EXAMINATION FOR
OFFICER ENTRIES INTO AIRFORCE**

General Instructions

1. In this section, standardized guidelines for the physical assessment of candidates for commissioning through CDSE into flying duty branches in the IAF are elaborated. The purpose of these guidelines is to lay down uniform physical standards and to ensure that the candidates are free of health conditions that may hamper or limit their performance in the respective branch. The guidelines enumerated in this section are meant to be applied in conjunction with the standard methods of clinical examination.
2. All candidates during their induction should meet the basic physical fitness standards which will enable them to proficiently undergo the training and the subsequent service in varied climatic and work environments. A candidate will not be assessed physically fit unless the complete examination shows that he/ she is physically and mentally capable of withstanding the severe physical and mental strain for prolonged periods. The requirements of medical fitness are essentially the same for all branches, except for aircrew in whom the parameters for visual acuity, anthropometry and certain other physical standards are more stringent.
3. The medical standards spelt out pertain to initial entry medical standards. Continuation of medical fitness during training will be assessed during the periodic medical examinations held at AFA prior to commissioning. They are not exhaustive, in view of the vast spectrum of diseases. These standards are subject to change with the advancement in the scientific knowledge and change in working conditions of Armed Forces.
4. **Laboratory and Radiological Investigations for Special Medical Board**
 - (a) Hematology: Complete Haemogram (Haemoglobin estimation, Total Leucocyte Count with Differential Leucocyte Count, Platelet Count).
 - (b) Hb Electrophoresis will be carried out in candidates for commissioning to exclude Haemoglobinopathies.
 - (c) Biochemistry: Liver function test (LFT), Renal Function Test (RFT), Blood glucose estimation (Fasting and two hours after 75 g anhydrous glucose/82.5 g glucose monohydrate loading), Lipid profile.
 - (d) Urine Routine Examination (RE) and Microscopic Examination (ME).
 - (e) ECG.
 - (f) Radiology: -
 - (i) Radiograph Chest PA view in all candidates.
 - (ii) Radiograph Lumbosacral Spine: AP and Lateral views in all candidates.
 - (iii) In addition to the above radiographs, Cervical Spine - AP and Lateral views, Dorsal Spine - AP and Lateral views will be carried out in all candidates being assessed **for flying duties**.
 - (iv) USG Abdomen and Pelvis.
 - (v) Any other additional investigation deemed necessary will be conducted during the Appeal stage.

General Physical Assessment

5. Every candidate, to be fit for the Air Force, must conform to the minimum standards laid down in the succeeding paragraphs. The physical parameters should fall within the acceptable ranges and should be proportionate.
6. The residual effects of old fractures/ injuries are to be assessed for any functional limitation. If there is no effect on function, the candidate can be assessed fit. Following categories should be meticulously assessed:

- (a) **Spine Injuries.** Cases of old fractures of spine are unfit. Any residual deformity of spine or compression of a vertebra will be cause for rejection.
- (b) **Nerve Injuries.** Injuries involving the trunks of the larger nerves, resulting in loss of function, or neuroma formation, which causes pain significant tingling, indicate unsuitability for employment in flying duties.
- (c) **Keloids.** The presence of large or multiple keloids will be a cause for rejection.
- (d) **Surgical Scars.** Minor well-healed scars for e.g as resulting from any superficial surgery do not, per se, indicate unsuitability for employment. Extensive scarring of a limb or torso that may cause functional limitation or unsightly appearance should be considered unfit.
- (e) **Birth Marks.** Abnormal pigmentation in the form of hypo or hyper-pigmentation is not acceptable. Localized, congenital mole/ naevus, however, is acceptable provided its size is <10 cm. Congenital multiple naevi or vascular tumours that interfere with function or are exposed to constant irritation are not acceptable.
- (f) **Subcutaneous Swellings.** Lipoma will be considered fit unless the lipoma is causing significant disfigurement/ functional impairment due to the size/ location. Neurofibroma, if single will be considered fit. Multiple neurofibromas associated with significant *Café-au-lait* spots (more than 1.5 cm size or more than one in number) will be considered unfit.
- (g) **Cervical Rib.** Cervical rib without any neuro-vascular compromise will be accepted. Meticulous clinical examination to rule out neuro-vascular compromise should be performed in such cases. This should be documented in the Medical Board proceedings.
- (h) **Cranio-facial Deformities.** Asymmetry of the face and head or uncorrected deformities of skull, face or mandible which will interfere with proper fitting of oxygen mask, helmet or military headgear will be considered unfit. Major deformities even after corrective surgery will be considered unfit.
- (i) **History relating to Operations.** A candidate who has undergone an abdominal operation involving extensive surgical intervention or partial/ total excision of any organ is, as a rule, unfit for service. Operation involving the cranial vault with any residual bony defect will be unfit. Major thoracic operations will make the candidate unfit.

Measurements and Physique

7. **Chest Shape and Circumference.** The chest should be well proportioned and well developed. Any chest deformity likely to interfere with physical exertion during training and performance of military duties or adversely impact military bearing or are associated with any cardio-pulmonary or musculoskeletal anomaly are to be considered unfit. Minimum acceptable chest circumference in male candidates for commissioning is 77 cm. The chest expansion must be at least 05 cm for all categories of candidates. For the purpose of documentation, any decimal fraction lower than 0.5 cm will be ignored, 0.5 cm will be recorded as such and 0.6 cm and above will be recorded as 01 cm.

8. **Height.**

(a) **Ground Duty Branches.** The minimum height for entry into ground duty branches is as follows: -

- (i) Male – 157 cm.
- (ii) Female - 152 cm.

Note 1:- In case of candidates of Lakshadweep ethnicity, the minimum acceptable height is reduced by 02 cm (155 cm for males and 150 cm for females). For Gorkhas and individual belonging to North-Eastern regions of India and hilly regions of Uttarakhand, the minimum acceptable height will be 05 cm less (152 cm for males and 147 cm for females).

Note 2:- Candidates of North East and Hilly states ethnicity includes Gorkhas, Kumaonis, Garhwalis, Assamese and those belonging to the states of Nagaland, Manipur, Mizoram, Meghalaya, Arunachal Pradesh, Tripura, Sikkim and hilly areas of Uttarakhand.

(b) **Flying Duty Branches.** The minimum height (both male and female) for entry into flying duty branches is as follows: -

- (i) Pilots, Flight Test Engineers (FTE) and WSO of Su 30 MKI - **162 cm.**
- (ii) Officers and airmen who apply for aircrew duties, other than F(P), FTE duties and WSO of Su-30 MKI - **157 cm.**

9. **Sitting Height, Leg Length and Thigh Length.** Acceptable measurements of leg length, thigh length and sitting height for such aircrew will be as under: -

(a) Sitting height	Minimum	-	81.5 cm
	Maximum	-	96.0 cm
(b) Leg Length	Minimum	-	99.0 cm
	Maximum	-	120.0 cm
(c) Thigh Length	Maximum	-	64.0 cm

10. **Body Weight Parameters**

(a) The acceptable weight range for candidates is given at Appendix A (Male candidates) to this guidelines. Candidates outside the given weight range for their age and height will not be acceptable.

Appendix A
(Refer para 8 & 10)

WEIGHT FOR HEIGHT CHART: MALES (AT ENTRY)

Height (cm)	Minimum Weight (Kg)	Maximum Weight (Kg)		
		Age at last birthday Below 20 yrs	Age at last birthday 20 to 25 yrs	Age at last birthday Above 25 yrs
152	40	53	55	58
153	40	54	56	59
154	40	55	57	59
155	41	55	58	60
156	41	56	58	61
157	42	57	59	62
158	42	57	60	62
159	43	58	61	63
160	44	59	61	64
161	44	60	62	65
162	45	60	63	66
163	45	61	64	66
164	46	62	65	67
165	46	63	65	68
166	47	63	66	69
167	47	64	67	70

Height (cm)	Minimum Weight (Kg)	Maximum Weight (Kg)		
		Age at last birthday Below 20 yrs	Age at last birthday 20 to 25 yrs	Age at last birthday Above 25 yrs
168	48	65	68	71
169	49	66	69	71
170	49	66	69	72
171	50	67	70	73
172	50	68	71	74
173	51	69	72	75
174	51	70	73	76
175	52	70	74	77
176	53	71	74	77
177	53	72	75	78
178	54	73	76	79
179	54	74	77	80
180	55	75	78	81
181	56	75	79	82
182	56	76	79	83
183	57	77	80	84
184	58	78	81	85
185	58	79	82	86
186	59	80	83	86
187	59	80	84	87
188	60	81	85	88
189	61	82	86	89
190	61	83	87	90
191	62	84	88	91
192	63	85	88	92
193	63	86	89	93
194	64	87	90	94
195	65	87	91	95
196	65	88	92	96
197	66	89	93	97
198	67	90	94	98
199	67	91	95	99
200	68	92	96	100

Cardiovascular System

11. Pulse. Persistent sinus tachycardia (> 100 bpm) as well as persistent sinus bradycardia (< 60 bpm) are unfit. In case bradycardia is considered to be physiological, the candidate can be declared fit after evaluation by Medical specialist/cardiologist.

12. Blood pressure. An individual with systolic blood pressure greater than or equal to 140 mmHg and/or diastolic blood pressure greater than or equal to 90 mmHg shall be rejected.

13. Cardiac Murmurs. Evidence of organic cardiovascular disease will be cause for rejection. Diastolic murmurs are invariably organic. Short systolic murmurs of ejection systolic nature and not associated with thrill and which diminish on standing, especially if associated with a normal ECG and chest radiograph, are most often functional.

14. **ECG.** Any ECG abnormality detected at SMB/Recruitment Medical Examination will be a ground for rejection. Benign ECG abnormalities like incomplete RBBB, T wave inversion in inferior leads, T inversion in V1 to V3 (persistent juvenile pattern), LVH by voltage criteria (due to thin chest wall) may exist without any structural heart disease. Echocardiography should be performed in all such cases to rule out an underlying structural heart disease and opinion of Senior Advisor (Medicine)/Cardiologist should be obtained.

15. **Congenital Cardiac Anomalies.** All congenital cardiac anomalies will be declared unfit.

16. **Cardiac surgery and interventions.** Candidates with history of cardiac surgery/ intervention in the past will be considered unfit.

Respiratory System

17. **Pulmonary Tuberculosis.** Any residual scarring in pulmonary parenchyma or pleura, as evidenced by a demonstrable opacity on chest radiogram will be a ground for rejection. Old treated cases with no significant residual abnormality can be accepted if the diagnosis and treatment was completed more than two years earlier.

18. **Pleurisy with Effusion.** Any evidence of pleural thickening will be a cause for rejection. At the time of appeal, these cases will be subjected to detailed evaluation with appropriate investigations by Pulmonologist/Medical Specialist.

19. **Bronchitis.** History of repeated attacks of cough/wheezing/bronchitis may be manifestations of chronic bronchitis or other chronic pathology of the respiratory tract. Such cases will be assessed unfit and will be subjected to detailed evaluation with appropriate investigations at the time of appeal by Pulmonologist/Medical Specialist.

20. **Bronchial Asthma.** History of repeated attacks of bronchial asthma/wheezing/ allergic rhinitis will be a cause for rejection.

21. **Radiographs of the Chest.** Definite radiological evidence of disease of the lungs, mediastinum and pleurae are criteria for declaring the candidate unfit.

22. **Thoracic Surgery.** Candidate with history of any major surgery of the thorax will be considered unfit.

Gastrointestinal System

23. **Head to toe examination.** Presence of any sign of liver cell failure (e.g. loss of hair, parotidomegaly, spider naevi, gynaecomastia, testicular atrophy, flapping tremors etc) and any evidence of malabsorption (pallor, nail and skin changes, angular cheilitis, pedal edema) will entail rejection.

24. **Gastro-Duodenal Disabilities.** Any past surgical procedure involving partial or total loss of an organ (other than vestigial organs/gall bladder) will entail rejection.

25. **Diseases of the Liver.** If past history of jaundice is noted or any abnormality of the liver function is suspected, full investigation is required for assessment. Candidates suffering from viral hepatitis or any other form of jaundice will be rejected. Such candidates can be declared fit after a minimum period of 6 months has elapsed provided there is full clinical recovery; HBV and HCV status are both negative and liver functions are within normal limits. History of recurrent jaundice and hyperbilirubinemia of any nature is unfit.

26. **Disease of the Spleen.** Candidates who have undergone partial/ total splenectomy are unfit, irrespective of the cause for operation.

27. Anterior abdominal wall hernia including femoral hernia. (i) Fit. After 24 weeks of surgery (open as well as laparoscopic) provided there is no recurrence or post-op complications (ii) Unfit. (a) All current or operated cases of incisional hernia (b) All cases of current anterior abdominal wall hernia.

Inguinal Hernia. (i) FIT. After 24 weeks of hernia repair surgery (open as well as laparoscopic) provided there is no recurrence or post-op complications (ii) Unfit. All cases of current inguinal hernia

28. Abdominal Surgery. A candidate with well-healed scar post conventional abdominal surgery (except appendicectomy through right iliac fossa incision, refer para 36.2) will be considered fit after 24 weeks provided there is no potential for any recurrence of the underlying pathology, no evidence of incisional hernia and the condition of the abdominal wall musculature is good.

29. Anorectal Conditions. The examiner should do a digital rectal examination and rule out haemorrhoids, sentinel piles, anal skin tags, fissures, sinuses, fistulae, prolapsed rectal mass or polyps.

(a) **Fit.**

(i) After rectal surgery for polyps, haemorrhoids, fissure, fistula, ulcer or pilonidal sinus, provided there is no residual/recurrent disease.

(aa) Anal Fissure, Hemorrhoids: After 12 weeks of surgery.

(ab) Pilonidal Sinus: After 12 weeks of surgery.

(b) **Unfit.**

(i) Rectal prolapse even after surgical correction.

(ii) Active anal fissure/External Skin tags.

(iii) Hemorrhoids (external or internal).

(iv) Anal Fistula.

(v) Anal or rectal polyp.

(vi) Anal stricture.

(vii) Fecal incontinence.

30. Ultrasonography of Abdomen

(a) **Liver.**

Fit.

(i) Normal echo-anatomy of the liver, CBD, IHBR, portal and hepatic veins with liver span not exceeding 15 cm in the mid-clavicular line.

(ii) Solitary simple cyst (thin wall, anechoic) upto 2.5 cm diameter provided that the LFT is normal and hydatid serology is negative.

(iii) Hepatic calcifications to be considered fit if solitary and less than 01 cm with no evidence of active disease like tuberculosis, sarcoidosis, hydatid disease or liver abscess based on relevant clinical examinations and appropriate investigations.

Unfit.

(i) Hepatomegaly more than 15 cm in mid-clavicular line.

(ii) Fatty liver.

(aa) Grade 1 Fatty liver with abnormal LFT.

(ab) Grade 2 and 3 Fatty Liver.

(iii) Solitary cyst > 2.5 cm.

(iv) Solitary cyst of any size with thick walls, septations, papillary projections, calcifications and debris.

(v) Multiple hepatic calcifications or cluster greater than 01 cm.

(vi) Multiple hepatic cysts of any size.

- (vii) Any haemangioma irrespective of the size and location.
- (viii) Portal vein thrombosis.
- (ix) Evidence of portal hypertension (Portal Vein >13 mm, collaterals, ascites).

31. Gall Bladder.

(a) **Fit.**

- (i) Normal echo-anatomy of the gall bladder.
- (ii) **Post Laparoscopic Cholecystectomy.** After eight weeks, provided LFT and histopathology are within normal limits.
- (iv) **Post Open Cholecystectomy.** After 24 weeks, provided LFT and histopathology are within normal limits and in the absence of incisional hernia as confirmed on USG Abdomen.

(b) **Unfit.**

- (i) Cholelithiasis or biliary sludge.
- (ii) Choledocolithiasis.
- (iii) Polyp of any size and number.
- (iv) Choledochal cyst.
- (v) Gall bladder mass.
- (vi) Gall bladder wall thickness > 05 mm.
- (vii) Septate gall bladder.
- (viii) Persistently contracted gall bladder on repeat USG.
- (ix) Incomplete Cholecystectomy.

(c) **Non-visualized Gall Bladder on USG.** Will be considered unfit. They will be considered fit during appeal, if agenesis of gall bladder is confirmed on Magnetic Resonance Cholangio-Pancreatography (MRCP), in the absence of any other abnormality of the biliary tract.

32. Spleen.

(a) **Unfit.**

- (i) Spleen more than 13 cm in longitudinal axis (or if clinically palpable).
- (ii) Any Space Occupying Lesion in the spleen.
- (iii) Asplenia.
- (iv) Candidates who have undergone partial/ total splenectomy are unfit, irrespective of the cause of operation.

33. Pancreas.

(a) **Unfit**

- (i) Any structural abnormality.
- (ii) Any Space Occupying Lesion/ Mass lesion.
- (iii) Features of chronic pancreatitis (calcification, ductal abnormality, atrophy)

34. Peritoneal Cavity.

(a) **Unfit.**

- (i) Ascites.
- (ii) Solitary mesenteric or retroperitoneal lymph node > 01 cm. (Single retroperitoneal LN < 01 cm and normal in architecture may be considered fit).

- (iii) Two or more lymph nodes of any size
- (v) Any mass or cyst.

35. Major Abdominal Vasculature (Aorta/ IVC). Any structural abnormality, focal ectasia, aneurysm and calcification will be considered as unfit.

36. **Appendicectomy.**

(a) **Laparoscopic Appendicectomy** will be assessed for post-operative fitness after a minimum period of **four weeks**. Candidates will be considered fit if:-

- (i) Post-operative site scars are well healed.
- (ii) Scars are supple.
- (iii) Histopathological report of appendix is available.
- (iv) USG confirmation of absence of port site incisional hernia.

(b) **Open Appendicectomy** (appendicectomy through right iliac fossa incision only) will be assessed for post-op fitness after a minimum period **12 weeks**. Candidates will be considered fit, if :-

- (i) Wound has healed well.
- (ii) Scar is supple and non-tender.
- (iii) Histopathological report of appendix is available.
- (iv) USG confirmation of absence of surgical site incisional hernia.

Urogenital System

The fitness criteria to be followed are as follows:-

37. **Undescended testis (UDT)/ Orchidectomy.**

- (a) **Unfit.**
 - (i) If the testis cannot be palpated (unilateral or bilateral) even after examination of the candidate in squatting position.
 - (ii) Bilateral orchidectomy due to any cause such as trauma, torsion or infection is unfit.
- (b) **Fit.**
 - (i) Operatively corrected UDT at least four weeks after surgery, provided after surgical correction, the testis is normal in location and the wound has healed well.
 - (ii) Unilateral orchidectomy for benign cause, provided other testis is normal in size, fixation and location.

38. **Atrophic Testis.**

- (a) **Unfit.** Bilateral atrophied testis.
- (b) **Fit.** Unilateral atrophic testis for benign cause, provided other testis is normal in size, fixation and location.

39. **Varicocele.**

- (a) **Unfit.** All grades of current varicocele.
- (c) **Fit.** Post-operative cases of varicocele with no residual varicocele and no post-op complications or testicular atrophy after eight weeks of surgery.

40. **Hydrocele.**

- (a) **Unfit.** Current hydrocele on any side.
- (b) **Fit.** Operated cases of hydrocele after eight weeks of surgery, if there are no post-op complications and wound has healed well.

41. **Epididymal Cyst/ Mass, Spermatocele.**
(a) Unfit – Current presence of cyst / mass.
(b) Fit. After 08 Weeks of Post-operative well healed cases with no recurrence and only when benign on histopathology report.
42. **Epididymitis/ Orchitis.**
(a) Unfit – Presence of current orchitis or epididymitis/ tuberculosis.
(b) Fit After treatment, provided the condition has resolved completely.
43. **Epispadias/ Hypospadias.**
(a) Unfit – All are unfit, except glanular variety of hypospadias and epispadias, which is acceptable.
(b) Fit – Post-operative cases at least 08 weeks after successful surgery, provided recovery is complete and there are no complications.
44. **Penile Amputation.** Any amputation will make the candidate unfit.
45. **Phimosis.**
(a) Unfit – Current phimosis, if tight enough to interfere with local hygiene and voiding and/ or associated with Balanitis Xerotica Obliterans.
(b) Fit – Operated cases will be considered fit after 04 weeks of surgery, provided wound is fully healed and no post-op complications are seen.
46. **Meatal Stenosis**
(a) Unfit – Current disease, if small enough to interfere with voiding.
(b) Fit – Mild disease not interfering with voiding and post-operative cases after a period of 04 weeks of surgery with adequately healed wound and no Post Operative complications.
47. Stricture Urethra, Urethral Fistula. Any history of / current cases or post-op cases are unfit.
48. Sex reassignment surgery/ Intersex condition. Unfit
49. Nephrectomy. All cases, irrespective of the type of surgery (Simple/ radical/ donor/ partial/ RFA/ cryo-ablation) are unfit.
50. Renal Transplant Recipients. Unfit
51. Urachal Cyst :08 Weeks (To be declared fit in the absence of any remnant)
52. Cases of Bladder diverticulum will be declared as Unfit.
53. **Urine Examination.**
(a) **Proteinuria.** Proteinuria will be a cause for rejection, unless it proves to be orthostatic.
(b) **Glycosuria.** When glycosuria is detected, a blood sugar examination (fasting and after 75 g glucose) and glycosylated Hb is to be carried out, and fitness decided as per results. Renal glycosuria is not a cause for rejection.
(c) **Urinary Infections.** When the candidate has history or evidence of urinary infection it will entail full renal investigation. Persistent evidence of urinary infection will entail rejection.
(d) **Haematuria.** Candidates with history of haematuria will be subjected to full renal investigation.
54. **Glomerulonephritis.**
(a) Acute: In this condition there is a high rate of recovery in the acute phase, particularly in childhood. A candidate who has made a complete recovery and has no proteinuria may be assessed fit, after a minimum period of one year after full recovery.

- (b) Chronic:- Candidate with chronic glomerulonephritis will be rejected.

55. Renal Calculi: Irrespective of size, numbers, obstructive or non-obstructive, history of renal calculi (history or radiological evidence) will render a candidate Unfit.

56. Sexual Transmitted Diseases and Human Immuno Deficiency Virus (HIV). Seropositive HIV status and/ or evidence of STD will entail rejection.

57. Ultrasonography of the Abdomen - Urogenital System

58. Kidneys, ureters and urinary bladder

(a) Unfit

- (i) Congenital structural abnormalities of kidneys or urinary tract
 - (aa) Unilateral renal agenesis.
 - (ab) Unilateral or bilateral hypoplastic/ contracted kidney of size less than 08 cm.
 - (ac) Malrotation of kidney.
 - (ad) Horseshoe kidney.
 - (ae) Ptosed kidney.
 - (af) Crossed fused/ ectopic kidney.
- (ii) Simple single renal cyst of more than 1.5 cm size in one kidney.
- (iii) Complex cyst/ polycystic disease/ multiple or bilateral cysts.
- (iv) Renal/ ureteric/ vesical mass.
- (v) Hydronephrosis or Hydroureteronephrosis.
- (vi) Calculi - Renal/ Ureteric/ Vesical.
- (vii) Caliectasis

(b) Fit

- (i) Solitary, unilateral, simple renal cyst <1.5 cm provided the cyst is peripherally located, round/ oval, with thin smooth wall and no loculations, with posterior enhancement, no debris, no septa and no solid component.

Endocrine System.

59. Any history suggestive of endocrine disorders will be a cause for rejection.

60. Clinical Examination. Any clinical evidence of endocrine disease will be unfit.

61. All cases of thyroid swelling are unfit. Fitness of such cases will be decided during appeal medical board after evaluation with appropriate investigations.

62. Candidates detected to have Diabetes Mellitus will be rejected. A candidate with a family history of Diabetes Mellitus will be subjected to blood sugar (Fasting and after two hours of 75 g of anhydrous / 82.5 g monohydrate Glucose load) and HbA1c evaluation, which will be recorded.

Dermatological System.

63. Relevant History and Examination. Candidates who give history of sexual exposure to a Commercial Sex Worker (CSW) and have evidence of healed penile sore in the form of a scar must be declared permanently unfit, even in absence of an overt STD, as these candidates are likely 'repeaters' with similar indulgent promiscuous behavior.

64. Assessment of Diseases of the Skin. Acute non-exanthematous and non-communicable diseases, which ordinarily run a temporary course, need not be a cause of rejection. Diseases of a trivial nature, and those, which do not interfere with general health or cause incapacity, do not entail rejection.

65. Certain skin conditions are apt to become active and incapacitating under tropical conditions. An individual is unsuitable for service if he has a definite history or signs of chronic or recurrent skin disease. Some of such conditions are described below:-

66. **Palmoplantar Hyperhydrosis**. Some amount of Palmoplantar Hyperhydrosis is physiological, considering the situation that recruits face during medical examination. However, candidates with significant Palmoplantar Hyperhydrosis should be considered unfit.

67. **Acne vulgaris** Mild (Grade I) acne consisting of few comedones or papules, localized only to the face may be acceptable. However, moderate to severe degree of acne (nodulocystic type with or without keloidal scarring) or involving the back should be considered unfit.

68. **Palmoplantar Keratoderma** Any degree of palmoplantar keratoderma manifesting with hyperkeratotic and fissured skin over the palms, soles and heels should be considered unfit.

69. **Ichthyosis vulgaris** Ichthyosis involving the upper and lower limbs, with evident dry, scaly, fissured skin should be considered unfit. Mild xerosis (dry skin) could be considered fit.

70. Candidates having any keloid should be considered unfit.

71. Clinically evident onychomycosis of finger and toe-nails should be declared unfit, especially if associated with nail dystrophy. Mild degree of distal discoloration involving single nail without any dystrophy may be acceptable.

72. Giant congenital melanocytic naevi, greater than 10 cm should be considered unfit, as there is a malignant potential in such large sized naevi.

73. Single corns/ Warts/ Callosities will be considered fit, three months after successful treatment and no recurrence. However, candidates with multiple warts/ corns/ callosities on palms and soles or diffuse palmoplantar mosaic warts, large callosities on pressure areas of palms and soles should be rejected.

74. Psoriasis is a chronic skin condition known to relapse and/or recur and hence should be considered unfit.

75. **Vitiligo**. Those having vitiligo must be made unfit. On appeal, segmental vitiligo under the covered parts may be accepted.

76. A history of chronic or recurrent episodes of skin infections will be cause for rejection. Folliculitis or sycosis barbae from which there has been complete recovery may be considered fit.

77. Individuals who have chronic or frequently recurring episodes of a skin disease of a serious or incapacitating nature e.g. eczema are to be assessed as permanently unfit and rejected.

78. Any sign of Leprosy will be a cause for rejection. All peripheral nerves should be examined for any thickness of the nerves and any clinical evidence suggestive of leprosy is a ground for rejection.

79. Naevus depigmentosus and Beckers naevus may be considered fit. Intradermal naevus, vascular naevi are to be made unfit.

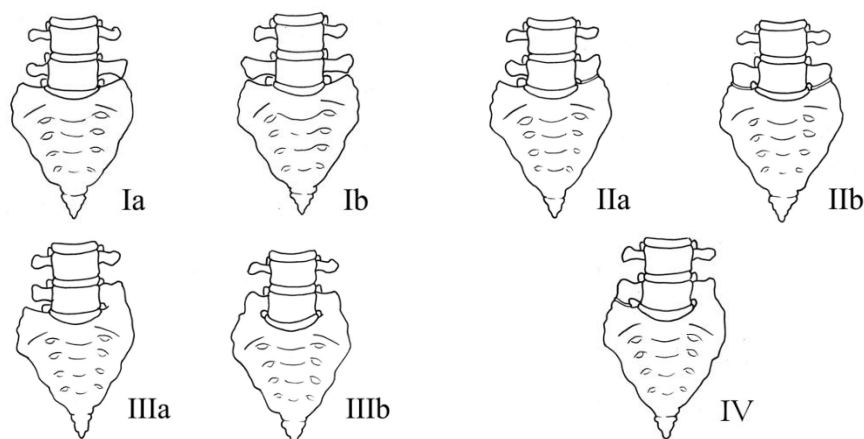
80. Pityriasis Versicolor is to be made unfit. They can be made fit on appeal, if completely treated.

81. Any fungal infection of any part of the body will be unfit. They can be made fit on appeal, if completely treated.
82. Scrotal Eczema may be considered fit on recovery.
83. Canities (premature graying of hair) may be considered fit if mild in nature and no systemic association is seen.
84. Intertrigo may be considered fit on recovery.
85. All STDs are unfit.
86. Scabies may be considered fit only on recovery.
87. Alopecia areata single and small (<2 cm in diameter) lesion on scalp can be accepted. However if multiple, involving other areas or having scarring, the candidate should be rejected.
88. **Gynaecomastia:** Candidates to be considered fit after 12 weeks of post-operative period if: -
 (a) There is a well healed surgical wound with no residual disease.
 (b) No Post Operative complication.
 (c) Surgical scar should be sufficiently matured and unlikely to cause any problems during military training.
 (d) Normal general physical examination.
 (e) Endocrine workup is normal
89. **Polymazia** Candidates to be considered fit after 12 weeks of Post-Operative period if there is no Post Operative complication with a well healed surgical wound and no residual disease.

Musculoskeletal System and Physical Capacity

90. **Spinal Conditions:** Past medical history of disease or injury of the spine or sacroiliac joints, either with or without objective signs, which has prevented the candidate from successfully following a physically active life, is a cause for rejection for commissioning. History of recurrent lumbago/ spinal fracture/ prolapsed intervertebral disc and surgical treatment for these conditions will entail rejection.
91. Clinical Examination. Normal thoracic kyphosis and cervical/ lumbar lordosis are barely noticeable and not associated with pain or restriction of movement.
- (a) If clinical examination reveals restriction of spine movements, deformities, tenderness of the spine or any gait abnormalities, it will be considered unfit.
- (b) Gross kyphosis, affecting military bearing/ restricts full range of spinal movements and/or expansion of chest is unfit.
- (c) When scoliosis is noticeable or any pathological condition of the spine is suspected, radiographic examination of the appropriate part of the spine needs to be carried out. Scoliosis is unfit, if deformity persists on full flexion of the spine, when associated with restricted range of spine movements or when due to an underlying pathological cause.
- (d) **Spina Bifida.** The following markers should be looked for, on clinical examination and corroborated with radiological evaluation:-
 (i) Congenital defects overlying the spine eg, hypertrichosis, skin dimpling, haemangioma, pigmented naevus or dermal sinus.
 (ii) Presence of lipoma over spine.
 (iii) Palpable spina bifida.
 (iv) Abnormal findings on neurological examination.

92. Castellvi Classification for Lumbosacral Transitional Vertebra (LSTV).



Castellvi Classification for LSTV

(a) **Type I.** Enlarged and dysplastic transverse process (at least 19 mm in width in craniocaudal dimension).

(i) **I a.** Unilateral.

(ii) **I b.** Bilateral.

(b) **Type II.** Pseudoarticulation of the transverse process and sacrum with incomplete lumbarisation/sacralisation (enlargement of the transverse process with pseudoarthrosis).

(i) **II a.** Unilateral.

(ii) **II b.** Bilateral.

(c) **Type III.** Transverse process fuses with the sacrum and there is complete lumbarisation or sacralisation (enlarged transverse process with complete fusion).

(i) **III a.** Unilateral.

(ii) **III b.** Bilateral.

(d) **Type IV.** Type II on one side and type III on the contralateral side.

93. Spinal Conditions Unfit for Air Force Duties (Both Flying and Ground Duties)

(a) **Congenital/Developmental Anomalies.**

(i) Wedge Vertebra.

(ii) Hemivertebra.

(iii) Anterior Central Defect.

(iv) Cervical Ribs (Unilateral/Bilateral) with demonstrable neurological or circulatory deficit.

(v) Spina Bifida. All types are unfit except in sacrum and LV5 (if completely sacralised).

(vi) Loss of Cervical Lordosis with neurological deficit.

(vii) **Assessment of Scoliosis.** Idiopathic scoliosis upto 10 degrees for Lumbar Spine and 15 degrees for Dorsal Spine will be acceptable provided:-

- (aa) Individual is asymptomatic.
 - (ab) No history of trauma to spine.
 - (ac) No chest asymmetry/shoulder imbalance or pelvic obliquity in the lumbar spine.
 - (ad) There is no neurological deficit.
 - (ae) No congenital anomaly of the spine.
 - (af) There is absence of syndromic features.
 - (ag) ECG is normal.
 - (ah) No deformity exists on full flexion of the spine.
 - (aj) No restriction of range of movements
 - (ak) No organic defect causing structural abnormality.
 - (vii) Atlanto-occipital and Atlanto-axial anomalies.
 - (ix) Incomplete block vertebra at any level.
 - (x) Complete block vertebra **at more than one level**. (Single level is acceptable. Annotation is to be made in AFMSF-2).
 - (xi) **Lumbosacral Transitional Vertebra (LSTV)**. Unilateral sacralisation or lumbarisation (complete or incomplete) and Bilateral incomplete sacralisation or lumbarisation (LSTV- Castellvi Type II a and b, III a and IV).
- Bilateral Complete Sacralisation of LV5 and Bilateral Complete Lumbarisation of SV1, LSTV Castellvi Type III b, Type I a and b are acceptable (Annotation is to be made in AFMSF-2).
- (xii) Spondylolysis/Spondylolisthesis.
 - (xiii) Intervertebral Disc Prolapse.
 - (xiv) Schmorl's Nodes at more than one level.
- (b) **Traumatic Conditions**
- (i) Spondylolysis/ Spondylolisthesis
 - (ii) Compression fracture of vertebra
 - (iii) Intervertebral Disc Prolapse
 - (iv) Schmorl's Nodes at more than one level
- (c) **Infective**
- (i) Tuberculosis and other Granulomatous disease of spine (old or active)

- (ii) Infective Spondylitis
- (d) **Autoimmune**
 - (i) Rheumatoid Arthritis and allied disorders
 - (ii) Ankylosing spondylitis
 - (iii) Other rheumatological disorders of spine e.g Polymyositis, SLE and Vasculitis
- (e) **Degenerative**
 - (i) Spondylosis
 - (ii) Degenerative Joint Disorders
 - (iii) Degenerative Disc Disease
 - (iv) Osteoarthritis/ osteoarthritis
 - (v) Scheuerman's Disease (Adolescent Kyphosis)
- (f) **Any other spinal abnormality, if so considered by the specialist.**

Conditions affecting the assessment of upper limbs

94. Amputations and Deformities of Upper limbs. Deformities of the upper limbs or their parts will be cause for rejection. Candidate with an amputation of a limb or any part of limb including fingers will not be accepted for entry.

95. Fingers and Hands. Deformities and limitations to movements will be considered unfit.

- (a) **Polydactyly.** Can be declared fit 12 weeks post- operative, if there is no bony abnormality on radiograph, wound is well healed, scar is supple and there is no evidence of neuroma on clinical examination.
- (b) **Simple Syndactyly.** Can be declared fit 12 weeks post-operative, if there is no bony abnormality on radiograph, wound is healed, scar is supple and webspace is satisfactory.
- (c) **Complex syndactyly.** Unfit.
- (d) **Hyperextensible finger joints.** All candidates shall be thoroughly examined for hyperextensible finger joints. Any extension of fingers bending backwards beyond 90 degrees shall be considered hyperextensible and considered unfit. Other joints like knee, elbow, spine and thumb shall also be examined carefully for features of hyper-laxity/hypermobility. Although the individual may not show features of hyperlaxity in other joints, isolated presentation of hyperextensibility of finger joints shall be considered unfit because of the various ailments that may manifest later, if such candidates are subjected to strenuous physical training.
- (e) **Mallet Finger.** Loss of extensor mechanism at the distal interphalangeal joint leads to Mallet finger. Chronic mallet deformity can lead to secondary changes in the proximal inter-phalangeal (PIP) and metacarpo-phalangeal (MCP) joint which can result in compromised hand function. Normal range of movement at distal inter-phalangeal (DIP) joints is 0-80 degree and PIP joint is 0-90 degree in both flexion and extension. In Mallet finger, the candidate is unable to extend/straighten distal phalanx of fingers completely.

- (i) Candidates with mild condition ie, less than 10 degree of extension lag without any evidence of trauma, pressure symptoms and any functional deficit must be declared fit.
- (ii) Candidates with fixed deformity of fingers will be declared unfit.

96. Wrist. Painless limitation of movement of the wrist will be assessed according to the degree of stiffness. Loss of dorsiflexion is more serious than loss of palmar flexion.

97. Elbow. Slight limitation of movement does not bar acceptance provided functional capacity is adequate. Ankylosis will entail rejection. Cubitus Valgus is said to be present when the carrying angle (angle between arm and forearm in anatomical posture) is exaggerated. In absence of functional disability and obvious cause like a fracture mal-union, fibrosis or the like, a carrying angle of upto 15° in male and 18° in female candidates would be made fit.

98. Hyperextension at elbow joint: Individuals can have naturally hyperextended elbow. This condition is not a medical problem, but can be a cause of fracture or chronic pain especially considering the stress and strains military population is involved in. Also, the inability to return the elbow to within 10 degrees of the neutral position is impairment in the activities of daily living.

(a) Measurement modality: Measured using a goniometer

(b) Recommendation: Normal elbow extension is 0 degrees. Up to 10 degrees of hyperextension is within normal limits if the patient has no history of trauma to the joint. Anyone with hyperextension more than 10 degrees should be unfit.

99. Cubitus Varus of > 5 degree will be unfit.

100. Cubitus Recurvatum:. Cubitus recurvatum>10 degrees is unfit

101. Shoulder Girdle. History of recurrent dislocation of shoulder with or without corrective surgery will be unfit.

102. Clavicle. Non-union of an old fracture clavicle will entail rejection. Mal-united clavicle fracture without loss of function and without obvious deformity are acceptable.

Conditions affecting the assessment of lower limbs

103. Hallux valgus with angle >20 degrees and first-second metatarsal angle of >10 degrees is unfit. Hallux valgus of any degree with bunion, corns or callosities is unfit.

104. Hallux rigidus is unfit for service.

105. Isolated single flexible mild hammer toe without symptoms may be accepted. Fixed (rigid) deformity or hammer toe associated with corns, callosities, mallet toes or hyperextension at meta-tarso-phalangeal joint (claw toe deformity) are to be rejected.

106. Loss of any digits/ toes entails rejection.

107. Deformities of the lower limbs or their parts will be cause for rejection. Candidate with an amputation of a limb or any part of limb including toes will not be accepted for entry.

108. Pes Planus (Flat feet)

(a) If the arches of the feet reappear on standing on toes, if the candidate can skip and run well on the toes and if the feet are supple, mobile and painless, the candidate is acceptable.

(b) Rigid or fixed flat feet, gross flat feet, with planovalgus, eversion of heel, cannot balance himself on toes, cannot skip on the forefoot, tender painful tarsal joints, prominent head of talus will be considered unfit. Restriction of the movements of the foot will also be a

cause for rejection. Rigidity of the foot, whatever may be the shape of the foot, is a cause for rejection.

109. Pes Cavus and Talipes (Club Foot). Mild degree of idiopathic pes cavus without any functional limitation is acceptable. Moderate and severe pes cavus and pes cavus due to organic disease will entail rejection. All cases of Talipes (Club Foot) will be rejected.

110. Ankle Joints. Any significant limitation of movement following previous injuries will not be accepted. Functional evaluation with imaging should be carried out wherever necessary.

111. Knee Joint. Any ligamentous laxity is not accepted. Candidates who have undergone ACL reconstruction surgery are to be considered unfit.

112. Genu valgum (knock knee) with intermalleolar distance > 5 cm in males and > 8 cm in females will be unfit.

113. Genu varum (bow legs) with intercondylar distance >7 cm will be considered unfit.

114. Genu Recurvatum. If the hyperextension of the knee is within 10 degrees and is unaccompanied by any other deformity, the candidate should be accepted as fit.

115. True lesions of the hip joint or early signs of arthritis will entail rejection.

Healed Fractures

116. Intra-Articular Fractures. All intra-articular fractures especially of major joints (shoulder, elbow, wrist, hip, knee and ankle) with or without surgery, with or without implant shall be considered unfit.

117. Extra-Articular Fractures.

(a) All extra-articular fractures with post-operative implant in-situ shall be considered unfit and will be considered for fitness after minimum of 12 weeks of implant removal.

(b) Nine months will be the minimum duration for considering evaluation following extra-articular injuries of all long bones (both upper and lower limbs) post injury which have been managed conservatively. Individual will be considered fit if there is:-

- (i) No evidence of mal-alignment/mal-union.
- (ii) No neuro-vascular deficit.
- (iii) No soft tissue loss.
- (iv) No functional deficit.
- (v) No evidence of osteomyelitis/sequestra formation.

118. Peripheral Vascular System

119. Varicose Veins. All cases with active varicose veins will be declared unfit. Post-op cases of varicose veins also remain unfit.

120. Arterial System. Current or history of abnormalities of the arteries and blood vessels e.g. aneurysms, arteritis and peripheral arterial disease will be considered unfit.

121. Lymphoedema. History of past/ current disease makes the candidate unfit.

Central Nervous System

122. History of Mental Illness. A candidate giving a history of mental illness/psychological afflictions will be rejected.

123. Family History of Psychological Disorders. When a history of nervous breakdown, mental disease, or suicide of a near relative is obtained, a careful investigation of the personal past history from a psychological point of view is to be obtained. Any evidence of even the slightest psychological instability in the personal history or present condition must entail rejection.

124. Family History of Epilepsy. If a history of epilepsy is obtained in a near relative, then the candidate must be made unfit and subjected to a detailed evaluation with appropriate investigations at the time of appeal.

125. Severe or ‘Throbbing’ Headache and Migraine. A candidate with migraine, which was severe enough to make him/her consult a doctor, will be a cause for rejection. Even a single attack of migraine with visual disturbance or Migrainous epilepsy is to be made unfit.

126. Fits and Convulsions. History of epilepsy in a candidate is a cause for rejection. Seizures may masquerade as ‘faints’ and therefore the frequency and the conditions under which ‘faints’ took place must be elicited. Such attacks will be made unfit, whatever their apparent nature. An isolated fainting attack calls for enquiry into all the attendant factors to distinguish between syncope and seizures. Complex partial seizures, are criteria for making the candidate unfit.

127. Heat stroke. History of repeated attacks of heat stroke, hyperpyrexia or heat exhaustion bars employment for Air Force duties, as it is an evidence of a faulty heat regulating mechanism. A single severe attack of heat effects provided the history of exposure was severe, and no permanent sequelae were evident is, by itself, not a reason for rejecting the candidate.

128. Head Injury or Concussion. A history of severe head injury/fracture of the skull/ history of intracranial damage or any residual bony defect in the calvaria is a cause for rejection. Presence of burr holes will be cause for rejection.

129. Psychosis. All candidates who are suffering from psychosis are to be rejected. Drug dependence in any form will also be a cause for rejection.

130. Psychoneurosis. Mentally unstable and neurotic individuals are unfit for commissioning. Juvenile and adult delinquency, history of nervous breakdown or chronic ill-health are causes for rejection.

131. Organic Nervous Conditions. Any evident neurological deficit will call for rejection.

132. Tremors. Persistent tremors even after reassuring the candidate will be unfit. On appeal only pathological tremors will render the candidate unfit.

133. Stammering. Candidates with stammering will be declared unfit. Stammering will be made unfit, even if it is first detected during the time of appeal medical board.

134. Any history of mental disorder in the family or in the candidate himself/herself or signs of intellectual, emotional or conduct disorders or symptoms of psychosomatic disorders should be made unfit and subjected to detailed evaluation and appropriate investigations at the time of appeal by the psychiatrist.

135. Hyperstosis Frontalis Interna will be considered fit in the absence of any other metabolic abnormality.

Ear, Nose and Throat

136. Nose and Para-nasal Sinuses.

(a) **External Deformity of Nose or Deviated Nasal Septum.**

- (i) Unfit - Gross external deformity of nose causing cosmetic deformity or obstruction to free breathing as a result of a marked septal deviation.
- (ii) On appeal - Post corrective surgery with residual mild deviation with adequate airway patency will be acceptable after four weeks post surgery.
- (b) **Septal Perforation**- Unfit
 - (i) On appeal - Any anterior septal perforation/posterior septal perforation > 01 cm in the greatest dimension is a ground for rejection. A septal perforation which is associated with nasal deformity, nasal crusting, epistaxis and granulation irrespective of the size is a ground for rejection.
- (c) Atrophic rhinitis- Unfit.
- (d) Any history/clinical evidence suggestive of allergic rhinitis/vasomotor rhinitis are to be declared Unfit
- (e) Any infection of the para-nasal sinuses is to be declared Unfit. Such cases may be accepted following successful treatment at the Appeal Medical Board.
- (f) **Nasal polyposis**. Unfit (treated or untreated).

137. Oral Cavity.

- (a) **Unfit.**
 - (i) Current/operated cases of leukoplakia, erythroplakia, submucous fibrosis, ankyloglossia and oral carcinoma.
 - (ii) Current oral ulcers/growths and mucous retention cysts.
 - (iii) Trismus due to any cause.
 - (iv) Cleft palate, even after surgical correction.
- (b) **Fit.**
 - (i) Completely healed oral ulcers after four weeks post-surgery with proven benign histopathology.
 - (ii) Operated cases of mucus retention cyst with no recurrence and proven benign histology. Evaluation in these cases must be done after minimum four weeks post-surgery.
 - (iii) Sub-mucous cleft of palate with or without bifid uvula not causing Eustachian tube dysfunction may be accepted by ENT specialist, provided PTA, tympanometry and speech are normal.

138. Pharynx and Larynx. The following conditions are unfit:-

- (a) Any ulcerative/mass lesion of the pharynx.
- (b) Candidates in whom tonsillectomy is indicated. Such candidates may be accepted minimum four weeks after successful surgery provided there are no sequelae and histology is benign.
- (c) Cleft palate.
- (d) Any disabling condition of the pharynx or larynx causing persistent hoarseness or dysphonia.
- (e) Chronic laryngitis, vocal cord palsy, laryngeal polyps and growths.

139. Eustachian Tube Dysfunction. Unfit- Obstruction or insufficiency of Eustachian tube function.

140. Tinnitus. Unfit

141. Susceptibility to Motion Sickness. Specific enquiry must be made for any susceptibility to motion sickness. An endorsement to this effect must be made in AFMSF-2. Such cases will be fully evaluated and, if found susceptible to motion sickness, **they will be rejected for flying duties.** Any evidence of peripheral vestibular dysfunction due to any cause will entail rejection.

142. Hearing loss. The following are not acceptable:-

- (a) Hearing acuity below 600 cm in CV or FW.
- (b) The audiometric loss greater than 20 db, in frequencies between 250 and 8000 Hz on PTA.

143. External Ear. The following defects of external ear must be declared unfit:-

- (a) Gross deformity of pinna which may hamper wearing of uniform/personal kit/protective equipment, or which adversely impacts military bearing.
- (b) Cases of chronic otitis externa.
- (c) Any condition (ear wax, atresia/narrowing of external auditory meatus or neoplasm, exaggerated tortuosity of the canal, bony growth of external auditory canal) preventing a proper visualization of the tympanic membrane.
- (d) Granulation or polyp in external auditory canal.

144. Middle Ear. The following conditions of middle ear will entail rejection:-

- (a) **Otitis Media.** Current Otitis Media of any type will entail rejection. If evidence of healed chronic otitis media (in the form of tympanosclerosis/scarred tympanic membrane affecting only pars tensa part of tympanic membrane) and all operated cases of tympanoplasty/Myringotomy will be assessed by ENT specialist. They will be acceptable if Pure Tone Audiometry (PTA) and Tympanometry are normal. On appeal, a trial of decompression chamber may be carried out, if indicated, for aircrew, ATC/FC, submariners/divers.
- (b) Any type of TM perforation or healed perforation/retraction in pars flaccida of the tympanic membrane is unfit.
- (c) Marked retraction or restriction in TM mobility on pneumatic otoscopy.
- (d) Tympanometry showing patterns other than Type 'A' tympanogram.
- (e) Any implanted hearing devices eg, cochlear implants, bone-anchored hearing aids etc.
- (f) After middle ear surgeries viz, stapedectomy, ossiculoplasty, any type of mastoidectomy.

145. Miscellaneous Ear Conditions. The following ear conditions will entail rejection: -

- (a) Otosclerosis.
- (b) Meniere's disease.
- (c) Vestibular dysfunction including nystagmus of vestibular origin.
- (d) Bell's palsy following ear infection.

OPHTHALMIC SYSTEM

146. Clinical Examination findings.

- (a) Candidates, who are wearing spectacles or found to have defective vision, should be properly assessed. All cases of squint are unfit.
- (b) **Ptosis.**
 - (i) Candidates, who meet the following criteria are **Fit**.
 - (aa) Mild ptosis.
 - (ab) Clear visual axis.
 - (ac) Normal visual field.
 - (ad) No sign of aberrant degeneration/head tilt /Horner's Syndrome.
 - (ii) Rest all cases - **Unfit**
 - (iii) On appeal - Candidates who have undergone surgical correction may be considered fit provided one year has elapsed post-surgery with no recurrence, the above-mentioned criteria are met and upper eyelid is not more than 02 mm below the superior limbus.

- (c) **Exotropia**. Unfit.
- (d) **Anisocoria**. If size difference between the pupils is >01 mm, candidate will be considered unfit.
- (e) **Heterochromia irides**. Unfit
- (f) **Sphincter tears**. Can be considered fit, if size difference between pupils is <01 mm, pupillary reflexes are brisk with no observed pathology in cornea, lens or retina.
- (g) **Pseudophakia**. Unfit
- (h) **Blepharitis**. Candidates with blepharitis, particularly with loss of eyelashes, must be rejected.
- (j) **Ectropion/Entropion**. These cases are to be made unfit. On appeal, mild ectropion and entropion which in the opinion of ophthalmologist will not hamper day to day functioning in any way, may be made fit.
- (k) **Pterygium**. All cases of pterygium are to be made unfit. On appeal, regressive non-vascularised pterygium occupying ≤ 1.5 mm of the peripheral cornea may be made fit by Eye Specialist after measurement on a slit lamp.
- (l) **Nystagmus**. All cases of nystagmus are to be made unfit except for physiological nystagmus.
- (m) Naso-lacrymal duct occlusion producing epiphora or a mucocele entails rejection.
- (n) Active Uveitis (iritis, cyclitis and choroiditis) will be grounds for rejection. Candidates giving a history of this condition should be made unfit.
- (o) **Cornea**.
 - (i) **Unfit**
 - (aa) Corneal scars/opacities
 - (ab) Any candidate with progressive corneal disorders viz, Corneal dystrophies, Keratoconus, Keratoglobus, any corneal degenerations.
 - (ac) Any active corneal disorder.
 - (ii) On appeal corneal scars are acceptable if it does not interfere with vision.
- (p) **Lenticular opacities**. – Unfit
 - On appeal**
 - (i) **Unfit-** Any lenticular opacity that is causing visual deterioration or is in the visual axis or central area of 04 mm around the pupils is unfit. The propensity of the opacities not to increase in size or number should also be a considered.
 - (ii) **Fit -** Small stationary lenticular opacities in the periphery like congenital blue dot cataract, not affecting the visual axis/visual field (should be less than 10 in number and central area of 04 mm should be clear).
- (q) **Optic Nerve Drusen**. Unfit.
- (r) **High Cup - Disc ratio**. Unfit, if any of the following conditions exist:-

- (i) Inter-Eye asymmetry in cup disc ratio > 0.2 .
- (ii) Retinal Nerve fibre Layer (RNFL) defect seen by RNFL analysis on Optical Coherence Tomography (OCT).
- (iii) Visual Field defect detected by Visual Field Analyser.
- (s) Migraine with visual symptoms are not a strictly ocular problem and should be assessed in accordance with para 124.
- (t) As tests for night blindness are not routinely performed, a certificate to the effect that the individual does not suffer from night blindness will be obtained in every case. Certificate should be as per Appendix C to this chapter. A proven case of night-blindness is unfit.
- (u) Restriction of movements of the eyeball in any direction and undue depression/prominence of the eyeball are unfit.
- (v) **Retinal lesions.** A small healed chorio-retinal scar in the retinal periphery not affecting the vision and not associated with any other complications will be considered fit. Similarly, a small lattice in periphery with no other complications will be made fit. **Any lesion in the central fundus will be made unfit.**
- (w) **Lattice degeneration.**
 - (i) The following lattice degeneration will render a candidate unfit:-
 - (aa) Single circumferential lattice extending more than two clock hours in either or both eyes.
 - (ab) Two circumferential lattices, each more than one clock hour in extent in either or both eyes.
 - (ac) Radial lattices.
 - (ad) Any lattice with atrophic hole/flap tears (Unlasered).
 - (ae) Lattice degeneration posterior to equator.
 - (ii) Candidates with lattice degeneration will be considered fit under the following conditions:-
 - (aa) Single circumferential lattice without holes of less than two clock hours in either or both eyes.
 - (ab) Two circumferential lattices without holes each being less than one clock hour in extent in either or both eyes.
 - (ac) Post-laser delimitation, single circumferential lattice, without holes/flap tear, less than two clock hours extent in either or both eyes.
 - (ad) Post-laser delimitation, two circumferential lattices, without holes/flap tear, each being less than one clock hour extent in either or both eyes.
- (x) **Keratoconus.** Keratoconus is unfit.

147. Visual Acuity/Colour Vision. The visual acuity and colour vision requirements are detailed in Appendix D to this chapter. Those who do not meet these requirements will be rejected.

148. Myopia.

- (a) Unfit, if outside the prescribed visual limits.
- (b) Unfit even if the corrected visual acuity is within the acceptable limits when:-
 - (i) There is a strong family history of high myopia, and that the visual defect is recent onset.
 - (ii) If physical growth is still expected.
 - (iii) If the fundus appearance is suggestive of progressive myopia.

149. Refractive Surgeries. The disposal of candidates who have undergone Keratorefractive Surgeries (PRK, LASIK, Femto LASIK, SMILE or equivalent procedures) for commissioning in the Air Force in all branches is as follows :-

- (a) **Fit**
 - (i) Candidates for IAF meeting the visual requirements for the branch as laid down in Appendix D to para **146**. Residual refraction after such procedure should not be more than +/- 1.0 D Sph or Cyl for branches where correctable refractive errors are permitted.
 - (ii) Keratorefractive Surgery must not have been carried out before the age of 20 years.
 - (iii) At least 12 months must have elapsed post uncomplicated stable Keratorefractive Surgery with no history or evidence of any complication.
 - (iv) The axial length of the eye must not be more than 26 mm as measured by IOL master.
 - (v) The post Keratorefractive Surgery corneal thickness as measured by a corneal Pachymeter must not be less than 450 microns.
- (b) **Unfit**
 - (i) Radial Keratotomy (RK) surgery for correction of refractive errors
 - (ii) Individuals with high refractive errors (> 6 D) prior to Keratorefractive Surgery.

150. Cataract Surgeries. Candidates having undergone cataract surgery with or without IOL implants will be declared unfit.

151. Other Eye Surgeries. Candidates having undergone any invasive surgeries viz, Implantable Collamer Lens (ICL), Trabeculectomy, Glaucoma surgeries with or without implants, Corneal Collagen Crosslinking with Riboflavin (C3R), INTACS, any intra ocular injections, retinal surgeries etc, will be declared unfit.

Ocular Muscle Balance

152. Individuals with manifest squint are not acceptable for commissioning.

153. The assessment of latent squint or heterophoria in the case of aircrew will be mainly based on the assessment of the fusion capacity. A strong fusion sense ensures the maintenance of binocular vision in the face of stress and fatigue. Hence, it is the main criterion for acceptability.

- (a) **Convergence (as Assessed on RAF rule).**
 - (i) **Objective Convergence.**
 - (aa) Up to 10 cm- Fit.
 - (ab) More than 10 cm - Unfit.

(ii) **Subjective Convergence (SC).** This indicates the end point of binocular vision under the stress of convergence. If the subjective convergence is more than 10 cm beyond the limit of objective convergence, the fusion capacity is poor. This is specially so when the objective convergence is 10 cm and above.

(b) **Accommodation.** In the case of myopes, accommodation should be assessed with corrective glasses in position. The acceptable values for accommodation in various age groups are given in Table 1.

Table 1 -Accommodation Values – Age wise

Age in years	17-20	21-25	26-30	31-35	36-40	41-45
Accommodation (in cm)	10-11	11-12	12.5-13.5	14-16	16-18.5	18.5-27

154. Ocular muscle balance is dynamic and varies with concentration, anxiety, fatigue, hypoxia, drugs and alcohol. The above tests should be considered together for the final assessment. Standards for assessment of Ocular Muscle Balance are detailed in Appendix E to this chapter.

155. Any clinical findings in the media (cornea, lens, vitreous) or fundus, which is of pathological nature and likely to progress will be a cause for rejection. This examination will be done by slit lamp and ophthalmoscopy under mydriasis.

Appendix C

[Refers to para 146 (t)
Ophthalmology standards]

CERTIFICATE REGARDING NIGHT BLINDNESS

Name with initials _____

Batch No. _____ Chest No _____

I hereby certify that to the best of my knowledge, there has not been any case of night blindness in our family, and I do not suffer from it.

Date:

(Signature of the candidate)

Countersigned by

(Name of Medical Officer)

VISUAL STANDARDS FOR CANDIDATES AT INITIAL ENTRY

Sl No.	Med Cat	Branch	Maximum Limits of Refractive Error	Visual Acuity (VA) with limits of maximum correction	Colour Vision
1	A1G1	F (P) including WSOs, Flying Branch Candidates at NDA and AFA	Hypermetropia: + 1.5D Sph Manifest Myopia: Nil Astigmatism: +0.75D Cyl (within +1.5 D Max) Retinoscopic myopia: Nil	6/6 in one eye and 6/9 in other, correctable to 6/6 only for Hypermetropia	CP-I

Note: -

- Ocular muscle balance for personnel covered in Ser No. 1 and 2 must conform to Appendix E to this Chapter.
- The Sph correction factors mentioned above will be inclusive of the specified astigmatic correction factor. A minimum correction factor upto the specified visual acuity standard can be accepted.

Appendix E
(Refer para 154)

STANDARD OF OCULAR MUSCLE BALANCE FOR FLYING DUTIES

Ser. No.	Test	Fit
1	Maddox Rod Test at 06 m	Exo - 06 Prism D Eso - 06 Prism D Hyper - 01 prism D Hypo - 01 prism D
2	Maddox Rod Test at 33 cm	Exo -16 Prism D Eso - 06 Prism D Hyper - 01 Prism D Hypo - 01 Prism D
3	TNO Test or Titmus Fly Test	All of BSV grades
4	Convergence	Up to 10 cm
5	Cover Test for Distance and Near	Latent divergence/convergence recovery rapid and complete

Haemopoietic System

156. All cases of anemia (<13 g/dL in males and <12 g/dL in females) will be declared unfit during SMB.

157. All candidates with evidence of hereditary haemolytic anaemias (due to red cell membrane defect or due to red cell enzyme deficiencies) and haemoglobinopathies (Sickle cell disease, Beta-Thalassaemia: Major, Intermedia, Minor, Trait and Alpha Thalassaemia etc) are to be considered unfit for service.

158. Candidates with history of haemophilia or von Willebrand's disease are to be declared unfit. Candidates with clinical evidence of purpura or evidence of thrombocytopenia are to be considered

unfit. Cases of Purpura Simplex (simple easy bruising), a benign disorder seen in otherwise healthy women, may be accepted.

159. Monocytosis. Absolute monocyte counts greater than 1000/cumm or more than or equal to 10% of total WBC is to be deemed unfit.

160. Eosinophilia. Absolute eosinophil counts greater than or equal to 500/cumm is deemed unfit.

161. Haemoglobin more than 16.5 g/dL in males and more than 16 g/dL in females will be considered as Polycythemia and deemed Unfit.

Dental Fitness Standards

162. Dental Standards.

(a) Candidate must have a total minimum of 14 dental points and the following teeth must be present in the upper jaw in good functional opposition with the corresponding teeth in the lower jaw.

(i) Any four of the six anterior.

(ii) Any six of the ten posterior.

(b) The above dental standards are to be followed and candidates who do not conform to the laid down standards will be rejected.

163. Extra Oral Examination.

(a) **Gross Facial Examination.** Presence of any gross asymmetry or soft/hard tissue defects/scars or if any incipient pathological condition of the jaw is suspected, it will be a cause of rejection.

(b) **Functional Examination.**

(i) **Temporo-Mandibular Joint (TMJ).** TMJs will be bilaterally palpated for tenderness and/or clicking. Candidates with symptomatic clicking and/or tenderness or dislocation of the TMJ on wide opening will be rejected.

(ii) **Mouth Opening.** A mouth opening of less than 30 mm measured at the incisal edges will be reason for rejection.

164. Guidelines for Awarding Dental Points in Special Situations.

(a) **Dental caries.** Teeth with caries that have not been restored or teeth associated with broken down crowns, pulp exposure, residual root stumps, teeth with abscesses and/or sinuses will not be counted for award of dental points.

(b) **Restorations.** Teeth having restorations that appear to be improper/broken/discolored will not be awarded dental points. Teeth restored by use of inappropriate materials, temporary or fractured restorations with doubtful marginal integrity or peri-apical pathology will not be awarded dental points.

(c) **Loose Teeth.** Loose/mobile teeth with clinically demonstrable mobility will not be awarded dental points. Periodontally splinted teeth will not be counted for award of dental points.

(d) **Retained Deciduous Teeth.** Retained deciduous teeth will not be awarded dental points.

(e) **Morphological Defects.** Teeth with structural defects which compromise efficient mastication will not be awarded dental points.

(f) **Periodontium.**

(i) The condition of the gums, of the teeth included for counting dental points, should be healthy i.e. pink in colour, firm in consistency and firmly resting against the necks of the teeth. Visible calculus should not be present.

(ii) Individual teeth with localized periodontitis (swollen, red or infected gums or those with visible calculus) will not be awarded dental points.

(iii) Candidates with severe periodontal disease (generalized calculus, extensive swollen and red gums, with or without exudates), shall be rejected. If periodontal disease is not severe and the teeth are otherwise sound, the candidate may be accepted if in the opinion of the Dental Officer, he/she can be cured by simple periodontal therapy excluding extraction.

(g) **Malocclusion**. Candidates with malocclusion affecting masticatory efficiency and phonetics shall not be selected. Teeth in open bite will not be awarded dental points as they are not considered to be in functional apposition. Candidates having an open bite, reverse overjet or any visible malocclusion will be rejected. However, if in the opinion of the Dental Officer, the malocclusion of teeth is not hampering efficient mastication, phonetics, maintenance of oral hygiene or general nutrition or performance of duties efficiently, then candidates will be declared fit. The following criteria have to be considered in assessing malocclusion: -

(i) **Edge to Edge Bite**. Edge to edge bite will be considered as functional apposition.

(ii) **Anterior Open Bite**. Anterior open bite is to be taken as lack of functional opposition of involved teeth.

(iii) **Cross Bite**. Teeth in cross bite may still be in functional occlusion and may be awarded points, if so.

(iv) **Traumatic Bite**. Anterior teeth involved in a deep impinging bite which is causing traumatic indentations on the palate will not be counted for award of points.

(h) **Hard and Soft tissues**. Soft tissues of cheek, lips, palate, tongue and sublingual region and maxilla/mandibular bony apparatus must be examined for any swelling, discoloration, ulcers, scars, white patches, sub mucous fibrosis etc. All potentially malignant lesions will be cause for rejection. Clinical diagnosis for sub-mucous fibrosis with or without restriction of mouth opening will be a cause of rejection. Bony lesion (s) will be assessed for their pathological/physiological nature and commented upon accordingly. Any hard or soft tissue lesion will be a cause of rejection.

(j) **Orthodontic Appliances**. Fixed orthodontics lingual retainers will not be considered as periodontal splints and teeth included in these retainers will be awarded points for dental fitness. Candidates wearing fixed or removable orthodontic appliances will be declared unfit.

(k) **Dental Implants**. Implants and Implant Supported Prosthesis will not be awarded any dental points. In the case of ex-serviceman applying for re-enrolment, dental points will be awarded for removal dental prosthesis.

(l) **Fixed Partial Dentures (FPD)/Implant supported FPDs**. FPDs will be assessed clinically and radiologically for firmness, functional apposition to opposing teeth and periodontal health of the abutments. If all parameters are found satisfactory, dental points will be awarded for the natural tooth (abutments).

Note: - Any prosthesis, removable/fixed or implant borne, the natural tooth/teeth in that component will be awarded dental points.

165. The Following will be Criteria for Declaring a Candidate Unfit: -

(a) **Oral Hygiene**. Poor oral health status in the form of gross visible calculus, periodontal pockets and/or bleeding from gums will render candidate unfit.

(b) **Candidates Reporting Post Maxillo-Facial Surgery/Maxillofacial Trauma**. Candidates who undergo cosmetic or post-traumatic maxillofacial surgery/trauma will be UNFIT for at least 24 weeks from the date of surgery/injury whichever is later. After this

period, if there is no residual deformity or functional deficit, they will be assessed as per the laid down criteria.

(c) Candidate with dental arches affected by advanced stage of generalized active lesions of pyorrhoea, acute ulcerative gingivitis, and gross abnormality of the teeth or jaws or with numerous caries or septic teeth will be rejected.

1. Please visit www.joinindianarmy.nic.in for Medical Standards and Procedure of Medical Examination of Officers' Entry into Army as applicable.
2. Please visit www.joinindiannavy.gov.in for Medical Standards and Procedure of Medical Examination of Officers' Entry into Navy as applicable.
3. Please visit www.careerindianairforce.cdac.in for Medical Standards and Procedure of Medical Examination of Officers' Entry into Air Force as applicable.

Note: Permanent body tattoos are only permitted on inner face of forearm i.e from inside of elbow to the wrist and on the reverse side of palm/back (dorsal) side of hand. Permanent body tattoos on any other part of the body are not acceptable and candidates will be barred from further selection. Tribes with tattoo marks on the face or body as per their existing custom and traditions will be permitted on a case to case basis. Commandant Selection Centre will be competent authority for clearing such cases.

APPENDIX-(IV)

(Brief particulars of service etc.)

Pay scale of Army Officers and equivalent ranks in Air Force and Navy

Pay

Rank	Level	(Pay in Rs.)
Lieutenant	Level 10	56,100 -1,77,500
Captain	Level 10 B	61,300- 1,93,900
Major	Level 11	69,400 - 2,07,200
Lieutenant Colonel	Level 12A	1,21,200 - 2,12,400
Colonel	Level 13	1,30,600-2,15,900
Brigadier	Level 13A	1,39,600-2,17,600
Major General	Level 14	1,44,200-2,18,200
Lieutenant General HAG Scale	Level 15	1, 82, 200-2,24,100
HAG+Scale	Level 16	2,05,400 - 2,24,400
VCOAS/Army Cdr/ Lieutenant General	Level 17	2,25,000/-(fixed)
COAS	Level 18	2,50,000/-(fixed)

MSP to the officer is as follows

Military Service Pay(MSP) to the officers from the rank of Lieutenant to Brigadier	Rs 15,500 p.m. fixed	
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Fixed Stipend for cadet Training

Stipend to OfficerCadetsduring the entire duration of training in Service academies i.e. during training period at IMA and OTA.	Rs 56,100/-p.m.* (Starting pay in Level 10)
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* On successful commissioning, the pay in the Pay matrix of the Officer commissioned shall be fixed in first Cell of Level 10 and the period of training shall not be treated as commissioned service and arrears on account of admissible allowances, as applicable, for the training period shall be paid to cadets.

(i) **Other Allowances** Risk and Hardship allowance has been introduced by the 7th CPC under which an individual gets his entitled allowance as per risk and hardship of the area where he/she is serving.

(a)	Dearness Allowance	Admissible at the same rates and under the same conditions as are applicable to the civilian personnel from time to time
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(ii) **Dress allowance** *Rs 20,000/- per year.

(iii) **Free Ration in kind.**

In Peace and Field areas.

(iv) **Transport Allowance (TPTA).**

Pay Level	Higher TPTA Cities (Rs. Per month)	Other Places (Rs. Per month)
10 and above	Rs. 7200+DA thereon	Rs. 3600+DA thereon

Note :-

(a) **Higher Tpt Cities (UA).** Hyderabad, Patna, Delhi, Ahmadabad, Surat, Bengaluru, Kochi, Kozhikode, Indore, Greater Mumbai, Nagpur, Pune, Jaipur, Chennai, Coimbatore, Ghaziabad, Kanpur, Lucknow, Kolkata.

(b) The allowance shall not be admissible to those service personnel who have been provided with the facility of Government transport.

(c) Officers in Pay Level 14 and above, who are entitled to use official car, will have the option to avail official car facility or to draw the TPTA at the rate of Rs. 15,750+DA per month.

(d) The allowance will not be admissible for the calendar month(s) wholly covered by leave.

(e) Physically disabled service personnel will continue to be paid at double rate, subject to a minimum of Rs. 2250 + DA per month.

(vi) **Children Education Allowance.** *Rs 2250/- per month

* The rates of allowance would be enhanced by 25% automatically each time the DA goes up by 50%.

(i) Reimbursement should be done just once a year, after completion of the financial year (which for most schools coincides with the Academic year).

(ii) Certificate from the head of institution where the ward of government employee studies should be sufficient for this purpose. The certificate should confirm that the child studied in the school during the previous academic year.

In the case of allowances specific to Defence Forces, the rates of these allowances would be enhanced by 25% automatically each time the Dearness Allowance payable on the revised pay band goes up by 50% (GoI letter No. A-27012/02/2017-Estt(AL) dated 16 August 2017).

(iii) Please note that pay and allowances and rules/provisions thereof are subject to revision from time to time

(A) FOR CANDIDATES JOINING THE INDIAN MILITARY ACADEMY, DEHRADUN:

1. Before the candidate joins the Indian Military Academy.

(a) He will be required to sign a certificate to the effect that he fully understands that he or his legal heirs shall not be entitled to claim any compensation or other relief from the Government in respect of any injury which he may sustain. In the course of or as a result of the training or where bodily infirmity or death results in the course of or as a result of a surgical

operation performed upon or anaesthesia administered to him for the treatment of any injury received as aforesaid or otherwise.

(b) His parent or guardian will be required to sign a bond to the effect that if for any reason considered within his control, the candidate wishes to withdraw before the completion of the course or fails to accept a commission if offered; he will be liable to refund the whole or such portion of the cost of tuition, food, clothing and pay & allowances, received as may be decided upon by Government.

2. Candidates finally selected will undergo a course of training for about 18 months. Candidates will be enrolled under the Army Act as Officercadets. Officercadets will be dealt with the ordinary disciplinary purposes under the rules and regulations of the Indian Military Academy, Dehradun.

3. While, the cost of training including accommodations, books, uniforms, boarding and medical treatment will be borne by Government, candidates will be expected to meet their pocket expenses themselves.

4. An outfit allowance at the rate and under the general conditions applicable at the time for each cadet belonging to the Indian Military Academy will be placed at disposal of the Commandant of the Academy. The unexpended portion of the allowance will be :—

- (a) handed over to the cadet on his being granted a commission or
- (b) if he is not granted a commission refunded to the State.

On being granted a commission article of clothing and necessities purchased from the allowance shall become the personal property of the cadet. Such articles will, however be withdrawn from a cadet who resigns while under training or who is removed or withdrawn prior to commissioning. The article withdrawn will be disposed of to the best advantage of the State.

5. No candidate will normally be permitted to resign whilst under training. However, OfficerCadet resigning after the commencement of training may be allowed to proceed home pending acceptance of their resignation by HQ ARTRAC. Cost of training, messing and allied services will be recovered from them before their departure. They and their parents/guardians will be required to execute a bond to this effect before the candidates are allowed to join Indian Military Academy. An OfficerCadet who is not considered suitable to complete the full course of training may with permission of the Government, be discharged after paying the cost of Training laid down by the Govt. of India. Service candidates under these circumstances will be reverted back to their parent Unit.

6. Commission will be granted only on successful completion of training. The date of commission will be that following the date of successful completion of training. Commission will be permanent.

7. Pay and allowances, pensions, leave and other conditions of service after the grant of commission will be identified with those applicable from time to time to regular officers of the army.

8. Training: At the Indian Military Academy, Officer Cadets are given strenuous Military training for a period of 18 months aimed at turning out, officers capable of leading infantry subunits. On completion of successful training Officer Cadets are granted Permanent Commission in the rank of Lt. subject to being medically fit, in S1H1A1P1E1.

9. **Army Group Insurance Fund (AGIF).** The Officer Cadets when in receipt of stipend are insured for ₹ 1.25 Cr as applicable to officers of the regular Army. Subscription at the rate of ₹ 12,500/- will have to be paid in advance on monthly basis by the Officer Cadets to become members under the AGI Scheme as applicable to Regular Army Officers. For those who are invalidated out by IMB on account of disability and not entitled to any pension will be provided ₹ 25 lakhs for 100 percent disability. This will be proportionately reduced to ₹ 5 lakhs for 20 percent disability. However, for less than 20 percent disability, an ex-gratia grant of ₹ 50,000/- only will be paid. Disability due to alcoholism, drug addiction and due to diseases of pre-enrolment origin will not qualify for disability

benefit and Ex-Gratia Grant. In addition, Officer Cadets withdrawn on disciplinary grounds, expelled as an undesirable or leaving the Academy voluntarily will not be eligible for disability benefits and Ex-Gratia.

10. The following monetary benefits are available to the Cadets (Direct)/NoKs in the event of invalidment on medical grounds/death of a Cadet (Direct) due to causes attributable to or aggravated by military training:

(a) In Case Of Disablement

(i) Monthly Ex-gratia amount of Rs. 9,000/- per month.

(ii) Ex-gratia disability award @ Rs. 16200/- per month shall be payable in addition for 100% of disability during period of disablement subject to prorata reduction in case the degree of disablement is less than 100%. No disability award shall be payable in cases where the degree of disablement is less than 20%.

(iii) Constant Attendant Allowance (CAA) @ Rs 6750/- per month for 100% disabled on the recommendation of Invaliding Medical Board (IMB).

(b) IN CASE OF DEATH

(i) Ex-gratia amount of Rs. 12.5 lakhs to the NoK.

(ii) Ex-gratia amount of Rs. 9000/- per month to the NoK.

(c) The Ex-gratia awards to Cadets (Direct) / NoK, shall be sanctioned purely on ex-gratia basis and the same shall not be treated as pension for any purpose. However, dearness relief at applicable rates shall be granted on monthly ex-gratia as well as ex-gratia disability award. (Authority: GOI/MOD letter No.17(01)/2017(01)D(Pension/ Policy) dated 04 Sep 2017 as amended vide para 11 & 12 of GOI/MOD letter No.17(02)/2016 D(Pen/Pol) dated 04 Sep 2017.

11. Terms and Conditions of Service

(i) POSTING

Army officers are liable to serve anywhere in India and abroad.

(ii) PROMOTION

Substantive promotions

The following are the service limits for the grant of the substantive promotion to higher ranks.

By time scale :

Lt. On commission

Capt. On completion of 2 years of reckonable commissioned service

Major On completion of 6 years of reckonable commissioned service

Lt. Col. On completion of 13 years of reckonable commissioned service

Col (TS) On completion of 26 years of reckonable commissioned service

Col.

Brigadier

Major Gen.

Lt. Gen.

General

On Selection basis subject to
fulfilment of requisite
service conditions

(B) FOR CANDIDATES JOINING THE INDIAN NAVAL ACADEMY, EZHIMALA, KERALA

(i) Candidates selected for training at the Indian Naval Academy will be appointed as Cadets under the Graduate Cadet Special Entry Scheme (GSES) Course. The Selection of the cadets is based on the candidate qualifying in the Combined Defence Service Examination (CDSE), followed by SSB interview and Medical Examination. Meritorious candidates who are medically fit are appointed to the 32 vacancies of Executive Branch (General Service/ Hydro) (including 06 for Naval NCC 'C' certificate holding candidates under the NCC Special Entry Scheme).

(ii) Selection of Cadets from the National Cadet Corps. The eligibility, age-limits, educational qualifications for candidates applying under the NCC Special Entry Scheme are the same as the GSES candidates except for the following:-

a) A NCC Cadet must have served for not less than three academic years in the Senior Division, Naval Wing of the National Cadet Corps, and must be in possession of Certificate "C" (Naval). Those who have appeared or intend to appear for certificate "C" examination are also eligible to apply but their final selection shall depend on producing the Certificate before the commencement of the course.

b) The NCC Cadet must be in possession of a certificate of good conduct and character from his University or Principal of his College.

c) A NCC Cadet shall not be eligible to apply after twelve months of leaving the Senior Division, Naval Wing of the National Cadet Corps.

d) In order to apply, a cadet must submit his application to his Officer Commanding, N.C.C. Unit, Naval Wing, who shall forward it through the Circle Commander concerned to the N.C.C. Directorate, Ministry of Defence, New Delhi. The N.C.C. Directorate will forward the applications to the Chief of the Naval Staff. The applications shall be submitted on the prescribed form. These forms will be available at all N.C.C. Units.

e) Candidates who are considered prima facie suitable shall be required to appear before a Service Selection Board for interview and other tests.

f) Candidates to be finally selected should at least secure the minimum qualifying marks at the Services Selection Board. Subject to this condition and to their being declared medically fit, successful candidates shall be placed in the order of merit based on the total marks secured in the written examination and the Service Selection Board interview. The final selection shall be made in the order of merit up to the number of vacancies available.

(iii) Candidates, finally selected for training at the Academy will be appointed as cadets in the Executive Branch of the Navy. A sum of Rs. 35,000/- should be brought by them and deposited in the bank account, which they would be opening at the State Bank of India, Ezhimala branch, on arrival. Since it is a large amount, it is advised that they carry a demand draft payable to self. The deposit money would be used to meet the following expenditures:—

- | | |
|---|--|
| (a) Pocket/Personal expenses | Rs. 5,000/-
@ Rs. 1,000/- per month |
| (b) Expenses on Laundry, Civilian-bearer, Cinema, hair cutting and other sundry services | Rs. 4,250/-
@ Rs. 850/- per month |
| (c) Expenses on stitching/purchase of Academy Blazer, Academy tie, Academy Mufti, Academy Sportswear, Jogging shoes, Jungle boots, Swimming Trunk/suits and Satchels. | Rs.20,000/- |

(d) Travelling expenses for proceeding to next duty station/home station on leave on completion of Naval Orientation Course on return Journey at the end of the term. Rs. 2,000/-

(e) **Insurance:** The GSES cadets would have to pay Rs. 2303/- one time non-refundable contribution for an Insurance cover of Rs. 20,00,000/- (Rupees twenty lakh only) for a period of six months. Their disability cover and contribution if relegated would be at par with Non-GSES cadets (NGIF letter No. BA/GIS/215 dated 06 Nov 2018).

(iv) Training: Selected candidates may be appointed as cadets on reporting at the Indian Naval Academy.

The candidates shall remain under probation till completion of initial training which is as follows:-

- | | |
|---|--------------|
| (a) Naval Orientation Course at INA, Ezhimala | 44 weeks |
| (b) Officers Sea Training at Training Ship | 06 months |
| (c) Sub-Lieutenant Afloat training | 06 months |
| (d) Sub-Lieutenant (Technical course) A float attachment for award of | 33 weeks |
| (e) Full Naval watch-keeping Certificate | 06-09 months |

(v) Commissioning & Other Benefits The cadets shall be commissioned in the rank of Sub-Lieutenant after successful completion of approximately 18 months of training. The careers prospects, leave benefits, leave and travel concession, pensionary/retirements benefits and all such perks and privileges provided to officers in the Navy is similar to those being provided by the two services.

(vi) The cost of training including accommodation and allied services, books, uniform, messing and medical treatment of the cadets of the Indian Naval Academy will be borne by the Government. Parents or guardians of cadets will, however, be required to meet their pocket and other private expenses while they are cadets. When a cadet's parent or guardian has an income less than Rs. 1500 per mensem and is unable to meet wholly or partly the pocket expenses of the cadet financial assistance upto Rs.140 per mensem may be granted by the Government. A candidate desirous of securing financial assistance may immediately after his selection, submit an application through the District Magistrate of his District, who will with his recommendations, forward the application to the Principal Director of Manpower Planning & Recruitment, Naval Headquarters, New Delhi-110011.

Note: Further information, if desired, may be obtained from the Directorate of Manpower, Planning & Recruitment, Naval Headquarters, New Delhi-110011.

(C) FOR CANDIDATES JOINING THE AIR FORCE ACADEMY

1. There are three modes of entry in F(P) Course viz. CDSE/NCC Special Entry/AFCAT. Candidates who apply for Air Force through more than one source will be tested/interviewed at Air Force Selection Boards as per type of entry. Common candidate who fail in Computer Pilot Selection System (CPSS) cannot be tested for flying branch in IAF.

2. Detailing for Training—Candidates recommended by the AFSBs and found medically fit by appropriate medical establishment are detailed for training strictly on the basis of merit and availability of vacancies. Separate merit list are prepared for Direct Entry candidates through UPSC and for NCC candidates. The merit list for Direct Entry Flying (Pilot) candidates is based on the combined marks secured by the candidates in the tests conducted by the UPSC and at the Air Force

Selection Boards. The merit list for NCC candidates is prepared on the basis of marks secured by them at AFSBs.

3. Training—The approximate duration of training for Flying Branch (Pilots) at the Air Force Academy will be 74 weeks.

Air Force Group Insurance Society would pay Rs 1,25,00,000 for a monthly contribution of Rs 8,600/ pm as insurance cover to the next-of-kin of a flight cadet drawn from Civil life and undergoing flying training in an unfortunate eventuality. In case flight cadet undergoing training is medically invalidated boarded out, he will be paid Rs 62,50,000 as disability insurance cover for 100% disability and this reduces proportionately upto 20%.

Flight Cadets shall receive a fixed stipend of Rs. 56,100/- per month (starting pay in Level 10) for the period of training. "On successful completion of training the stipend admitted will be converted as pay for all purposes. However, the period of training shall not be treated as commissioned service."

Once flight cadets are granted pay and allowances by government, the insurance cover will remain as above for a monthly contribution of Rs 8,600/- pm. The Contribution comprises of Risk Element and Saving Element. The Saving Element of Rs 5120/- out of Rs 8600/- will continue to earn interest and paid as Survival Benefit at the time of Retirement.

4. Career Prospects :

After successful completion of training, the candidates pass out in the rank of Flying Officer and will be entitled to the pay and allowances of the rank. Time scale promotions to the rank of Flight Lieutenant, Squadron Leader, Wing Commander and Group Captain are granted on completion of 2 years, 6 years, 13 years and 26 years of successful service respectively. Grant of Group Captain (select) and higher ranks is only by selections. Promising officers have a fair chance of getting higher promotions to air ranks—Air Commodore, Air Vice Marshal and Air Marshal.

5. Leave and Leave Travel Concession:

Annual Leave—60 days a year.

Casual Leave—20 days a year.

Officers are authorised encashment of Annual Leave upto 10 days alongwith LTC to the extent of a total 60 days in a career span to cover incidental expenses on travel.

Officers when proceeding on annual/casual leave, irrespective of its duration, is entitled for free conveyance from place of duty (unit) to home town and back once in the second year of his service for the first time and thereafter every alternate year to any place in India in lieu of home town or selected place of residence without any distance restriction.

In addition officers of Flying branch employed on regular Flying Duties in vacancies in authorised establishment are allowed, while proceeding on leave once every year on warrant a free rail journey in the appropriate class upto a total distance of 1600 kms. for the forward and return journeys both inclusive.

Officers when travelling on leave at their own expenses are entitled to travel by entitled class or lower class on payment of 60 per cent of the fare for self, wife and children from unit to any place within India on 6 one-way journey Form 'D' in a calendar year. Two of these Form 'D' may be availed of for the entire family. In addition to wife and children family includes parents, sisters and minor brothers residing with and wholly dependent upon the officers.

6. Other Privileges:

The officers and their families are entitled to free medical aid, accommodation on concessional rent, group insurance scheme, group housing scheme, family assistance scheme, canteen facilities etc.

(D) FOR CANDIDATES JOINING THE OFFICERS TRAINING ACADEMY, CHENNAI

1. Before the candidate join the Officers Training Academy Chennai.

(a) He/she will be required to sign a certificate to the effect that he/she fully understands that he/she or his/her legal heirs shall not be entitled to claim any compensation or other relief from the Government in respect of any injury which he/she may sustain in the course of or as a result of the training or where bodily infirmity or death results in the course of or as a result of a surgical operation performed upon or anaesthesia administered to him/her for the treatment of any injury received as aforesaid or otherwise.

(b) His/her parent or guardian will be required to sign a bond to the effect that if for any reason considered within his/her control, the candidate wishes to withdraw before the completion of the course or fails to accept a commission if offered or marries while under training at the Officers' Training Academy, he/she will be liable to refund the whole or such portion of the cost of tuition, food, clothing and pay & allowances, received as may be decided upon by Government.

2. Candidates finally selected will undergo a course of training at the Officers' Training Academy, for an approximate period of 49 weeks. Candidates will be enrolled as OfficerCadets. OfficerCadets will be dealt with the ordinary disciplinary purposes under the rules and regulations of the Officers' Training Academy.

3. While, the cost of training including accommodations, books, uniforms, boarding and medical treatment will be borne by the government, candidates will be expected to meet their pocket expenses themselves.

4. **Initial Deposit.** Candidates on arrival will deposit a bank draft for sum of Rs 28,000/- drawn in favour of the Commandant, OTA Chennai and payable at Chennai for the following purposes:-

(a) Army Group Insurance Fund Premium (@Rs 10,000 pm for first two months)	Rs. 20,000/-
(b) Initial pocket expenses incl cost of initial ordnance items	Rs. 8,000/-
Total	Rs. 28,000/-

5. No candidate will normally be permitted to resign whilst under training. However, Officer Cadets resigning after the commencement of training may be allowed to proceed home pending acceptance of their resignation by HQ ARTRAC. Cost of training, messing and allied services will be recovered from them before their departure. They and their parents/guardians will be required to execute a bond to this effect before the candidates are allowed to join Officers' Training Academy.

6. On joining OTA, cadets will be allowed to apply and proceed for civil central job interview/SSB in the first term of the training only. However, no cost of training including messing charges will be recovered from these OfficerCadets, who may resign from the Officers Training Academy, Chennai to undergo pre-commission training at the Indian Military Academy, Dehradun or corresponding cadet training establishment in Navy and Air Force, if so selected.

7. An Officer Cadet who is not considered suitable to complete the full course of training may, with permission of Government, be discharged after paying cost of training laid down by the Government of India. An Army candidate under these circumstances will be reverted to his Regiment or Corps.

NOTE. Candidates reporting to Indian Military Academy (IMA) and Officer Training Academy (OTA) are required to meet the following Physical Standards:-

Ser No	Activity	Minimum Physical Standards on Arrival	
		Office Cadet (Men)	Officer Cadet (Women)
(a)	2.4 Km Run	10 Minutes 30 Second	13 Minutes
(b)	Push Up	40	15
(c)	Pull UP	06	02
(d)	Sit Up	30	25
(e)	Squats	Two Sets of 30 Repetitions	
(f)	Lunges	Two Sets of 10 Repetitions	
(g)	Swimming	Should know fundamentals of swimming	

8. Training :

Selected candidates will be enrolled as OfficerCadets and will undergo a course of training at the Officers' Academy for an approximate period of 49 Weeks. On successful completion of training Officer Cadets are granted Short Service Commission in the rank of Lt. from the date of successful completion of training. University of Madras will award "Post Graduate Diploma in Defence Management and Strategic Studies" to all cadets who successfully complete Pre-commissioning training at Officers Training Academy, Chennai.Candidates withdrawn from Officers' Training Academy on disciplinary grounds are not eligible to apply.

9. Terms and conditions of Services:

(a) Period of probation:

An officer will be on probation for a period of 6 months from the date he/she receives his/her commission. If he/she is reported on within the probationary period as unsuitable to retain his/her commission, he/she may be terminated any time whether before or after the expiry of the probationary period.

(b) Liability of Service:

Personnel granted Short Service Commission is liable to serve anywhere in India and abroad on selected appointments as decided by IHQ MOD (Army) from time to time.

(c) Tenure of Appointment:

Short Service Commission will be granted to Male and Female in the regular Army for 14 years i.e. for an initial period of 10 years extendable by a further period of 04 years. Male and Female officers who are willing to continue to serve in the Army after the expiry of period of ten years Short Service Commission may, if eligible and suitable in all respects, be considered for the grant of Permanent Commission in the 10th year of their Short Service Commission in accordance with the relevant policies as issued from time to time.

Those SSC officers (Male and Female) who are not selected for grant of PC but are otherwise considered fit and suitable, will be given options to continue as SSCOs for a total period of 14 years (including the initial tenure of 10 years) on expiry of which they will be released from the Army.

(d) Special Provision for Release for SSC on completion of 5th Year of Service:

SSC (Non-Tech) Male & Female Officers, other than those who undergone or are undergoing Degree Engineering Course or any other specialized course of such nature, who are desirous of leaving the service after completion of five years service may, during the fifth year of service, apply to the Army HQs. for release. Army HQ will consider the applications of such officers on merits and the decision of the Army HQ will be final and irrevocable. On approval of such officers will be released from service on completion of 5th year of service. Those SSC (Non-Tech) Male & Female Officers who have undergone or are undergoing Degree Engineering Course or any other specialised course of such nature, will not be released before expiry of full tenure of 14 years unless the cost of training of such specialized course as prescribed is recovered from them. The Combat Aviation Course which is mandatory for Aviators is specialized course for Short Service Commissioned

Officers. They will be required to execute a bond to this effect on being nominated for undertaking Degree Engineering Course/Special Course of such nature.

(e) Special Provisions during Extended Tenure:

During extended tenure, they will be permitted to seek release from the Army on the following grounds:—

- (i) Taking up civil Job.
- (ii) Pursuing higher education.
- (iii) Starting own business/joining family business.

(f) Substantive Promotion :

SSCOs male and female granted Short Service Commission under these rules will be eligible for substantive promotion as under:—

- | | |
|-------------------------------|--|
| (i) To the rank of Capt. | on completion of 2 years reckonable commissioned service |
| (ii) To the rank of Major | on completion of 6 years reckonable commissioned service. |
| (iii) To the rank of Lt. Col. | on completion of 13 years reckonable commissioned service. |

(g) Mandatory Conditions:

Mandatory conditions for grant of above substantive ranks laid down for Permanent Commissioned officers as well as the eligibility, time limit and penalties for promotions exam Part B and D as applicable to permanent commission officers also be similarly applicable to SSCOs male and female.

(h) Adjustment of Seniority:

To make adjustment for shorter training of SSC male and female vis-a vis PC officers, the seniority of SSC male and female officers will be depressed by the period corresponding to the difference in training period between the SSC course under consideration and the training period of its equivalent PC Course. This adjustment of seniority will be carried out at the time of grant of first substantive rank of captain. The revised seniority will have no effect on the pay and allowances granted in the rank of Capt. Major and Lt.Col.

(i) Reckonable Commissioned Service:

Subject to provision of Para 10 (h) above, reckonable commissioned service for the purpose of these orders will count from the date of grant of Short Service Commission to an officer. The period of service forfeited by sentence of Court Martial or any summary award under the Army Act and the period of absence without leave will not be reckonable. The period during which furlough rates of pay are drawn and the period of captivity at POWs rates of pay will be reckonable. The period of service for promotion lost by an officer in consequence of his/her having been granted leave without pay will also be reckonable. Such an officer will, however, become entitled to the pay and allowances of the higher substantive rank granted by the inclusion of this period only from the date on which he/she would have qualified by service if this period had not been so reckoned and not with effect from the date of grant of substantive rank.

(j) Leave: Leave will be admissible in accordance with the Leave Rules for the Service Vol. 1-Army as amended from time to time.

For leave, officers will be governed by rules applicable to Short Service Commission officers as given in Chapter IV of the Leave Rules for the Service Vol.I-Army. They will also be entitled to leave on

passing out of the Officers Training Academy and before assumption of duties under the provision of the Rule 69 ibid.

SSC Women Officers will also be eligible for following kinds of Leave:

- **Maternity Leave:** Women Officers of the Army – Rule 56 of Chapter-IV of Leave Rule for the Services Vol.I-Army, Fourth Edition.
- **Child Care Leave:** Women Officers of the Army – Rule 56A of Chapter-IV of Leave Rules for the Services Vol.I-Army, Fourth Edition as amended vide GOI MoD letter No.B/33922/AG/PS-2(b)/3080/D(AG-II) dated 19 Nov 2018.
- **Child Adoption Leave:** Women Officers of the Army – Rule 56B of Chapter-IV of Leave Rules for the Services Vol.I-Army, Fourth Edition.

(k) Termination of Commission

The Commission of an officer may be terminated at any time by the Government of India for the following reasons:-

- (i) For misconduct or if services are found to be unsatisfactory: or
- (ii) on account of medical unfitness; or
- (iii) if his/her services are no longer required or
- (iv) if he/she fails to qualify in any prescribed test or course.

An officer may on giving 3 months notice be permitted to resign his/her commission on compassionate grounds of which the Government of India will be the sole judge. An officer who is permitted to resign his/her commission on compassionate grounds will not be eligible for terminal gratuity.

(l) Terminal Gratuity:

SSCO recruited from civil side are entitled to terminal gratuity @ 1/2 months emoluments for each completed six monthly period of service.

(m) Reserve Liability:

On being released on the expiry of contractual length of service of Short Service Commission or extension thereof (as the case may be) they will carry a reserve liability for a period of five years plus two years on voluntary basis or upto the age of 40 years in case of Male Officers and 37 years in case of Women Officers which is earlier.

(n) Miscellaneous:

All other terms and conditions of service where not at variance with the above provisions will be the same as for regular officers.
