

UNION PUBLIC SERVICE COMMISSION

EXAMINATION NOTICE NO. 1/2025-NDA-I

DATED 11.12.2024

(Last Date for Submission of Applications: 21.12.2024)

NATIONAL DEFENCE ACADEMY & NAVAL ACADEMY EXAMINATION (I), 2025 (Commission's Website <http://upsconline.gov.in>)

IMPORTANT

1. CANDIDATES TO ENSURE THEIR ELIGIBILITY FOR THE EXAMINATION:

The candidates applying for the examination should ensure that they fulfill 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.

Issue of Admission Certificate to the candidate will not imply that his candidature has been finally cleared by the Commission.

Verification of eligibility conditions with reference to original documents is 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 upsconline.gov.in. A candidate who is willing to apply for National Defence Academy and Naval Academy Examination shall be required to apply online and submit the requisite information and supporting documents through various claims, such as date of birth, educational qualifications, etc. as may be sought by the Commission alongwith the Registration and Online Application Form. For detailed instructions for filling up the form, the Notice for National Defence Academy and Naval Academy Examination (I), 2025 may be referred. The failure to provide the required information/documents alongwith the Online Application Form or without the necessary evidence, if any, provided by the Commission will result cancellation of candidature for the examination.

Registration has to be done only once on his name. This can be done anytime throughout the year. If the candidate is already registered, he/she can proceed straightforwardly for filling up the online application for the examination.

2.1 Modification in Registration Profile:

In case, the candidate wants to effect any change in his/her Registration profile, it shall be allowed only once in the lifetime after the registration at Registration platform. The option to change in Registration profile data shall be available till expiry of 7 days from the next day after the closure of application window of last/fourth last final application for any Examination of the Commission. In case, the candidate after registration applies for the first time in this examination, last date of modification of Registration would be 07.01.2026.

2.2 Modification in application form (Other than Registration Profile):

The Commission has also decided to extend the facility of making correction(s) in any

Validity of the application form for the examination from next day of the closure of the application window of the Examination. The window will remain open for 7 days from the date of opening of the same i.e. from 01.01.2026 to 07.01.2026. In case a candidate wants to carry out any change in his/her Registration profile during this period, then he/she should login to the Registration platform and do the needed accordingly. In other words, no change in the Registration profile can be made by varying the window for Submission of application form.

2.3 The candidate will not be allowed to withdraw their application after the submission of the same.

2.4 Candidates should also have details of one photo ID viz. Aadhar Card/ Voter Card/ PAN Card/ Passport/ Driving License/ School Photo ID/Any other photo ID Card issued by the State/Central Government. The details of this photo ID will have to be provided by the candidate while filling up the Registration and online application Form. The same photo ID card will also have to be uploaded with the Registration and online application Form. This photo ID will be used for all future reference and the candidate is advised to carry this ID while appearing for examination/ ETC.

3. LAST DATE FOR SUBMISSION OF APPLICATIONS:

The Online Applications can be filled upto 31.12.2026 till 6:00 PM. The eligible candidates shall be issued an e-Admit Card on the last working day of the preceding week of the date of examination. The e-Admit Card will be made available on the UPSC website (upscircles.gov.in) for being downloaded by candidates. No Admit Card will be sent by post. All the applicants are requested to provide valid & active e-mail id while filling up online application form as the Commission may use electronic mode for contacting them.

4. 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.

5. Online Question Paper Representation Portal (QFRep):

The Commission has introduced a time frame of 7 days (in total) i.e. from the next day of the Examination Date to 6:00 pm. of the 7th day is fixed for the candidates to make representations to the Commission on the questions raised in the Paper of the Examination. Such representation must be submitted through the "Online Question Paper Representation Portal (QFRep)" only by accessing the URL <http://upscircles.gov.in/mccirclescon/QFRep/>. No representation by email/post/land 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.

For both writing and marking answer in the OMR sheet (Answer Sheet) candidates must use black ball pen only. Pens with any other colour are prohibited. Do not use Pencil or ink pen. Candidates should note that any omission/missile/inaccuracy in writing/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.

6. FACILITATION COUNTER FOR GUIDANCE OF CANDIDATES:

In case of any guidance/information/clarification regarding their application, candidature etc. candidates can contact UPSC's Facilitation Counter <http://upscircles.gov.in>

7. PROHIBITED ITEMS:

- (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 cameras 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 items including 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.

8. Instruction in respect of uploading of Photograph while filling up online application form:-

- (a) The photograph uploaded by candidate should not be more than 10 days old from the start of the online application process (i.e. the application commencement date).
- (b) Ensure that the name of candidate and the date on which the photograph was taken are clearly mentioned on the photograph.
- (c) The candidate's face should occupy 3/4th of the space in the photograph.
- (d) The candidate must ensure that their appearance must match with their photograph at the time of Written Examination. For instance, if a candidate uploads a bearded photograph, he must appear with the same look in the Written Examination. Same would be the case with spectacles, mustaches, etc.
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.

CANDIDATES ARE REQUESTED TO APPLY ONLINE AT www.upsc.gov.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.	

F.No.07/02/2024.E.1(B). An Examination will be conducted by the Union Public Service Commission on 12th April, 2025 for admission to the Army, Navy and Air Force wings of the NDA for the 155th Courses and for the 117th Indian Naval Academy Course (INA-C) commencing from 2nd January, 2026.

The date of holding the examination as mentioned above is liable to be changed at the discretion of the Commission.

The approximate number of vacancies to be filled as the result of this examination will be as under :—

National Defense Academy	Army	208 (including 10 for female candidates)
	Navy	42 (including 06 for female candidates) [i] Flying - 02 (including 02 for female candidates)
	Air Force	[ii] Ground Duties [Tech] - 18 (including 02 for female candidates)
		[iii] Ground Duties [Non Tech] - 10 (including 02 for female candidates)
Naval Academy (10+2 Cadet Entry Courses)		26 (including 05 for female candidates)
	Total	: 406

Vacancies are provisional and may be changed depending on the availability of training capacity of National Defense Academy and Indian Naval Academy.

N.B. (i) A candidate is required to specify clearly in the Online Application Form the Services for which he wishes to be considered in the order of his preference (1 to 4). He is also advised to indicate as many preferences as he wishes to opt so that having regard to his rank in the order of merit due consideration can be given to his preferences when making appointments.

(ii) Candidates should note that they will be considered for appointment to those services only for which they express their preference and no other service(s). No request for addition/alteration in the preferences already indicated by a candidate in his application will be entertained by the Commission. Notwithstanding the Commission has also decided to extend the facility of making correction(s) in any field(s) of the application form for this examination.

This window will remain open for 7 days from the date of opening of the exam i.e. from 01-01-2025 to 07-01-2025. In case a candidate wants to carry out any change in his/her Registration profile during this period, then he/she should log into the Registration platform and do the needful accordingly. In other words, no change in the Registration profile can be made by using the window in Identification or application form.

(iii) 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

2. CENTRES OF EXAMINATION

The Examination will be held at the following Centres:

AGARTALA	CHATIABUDH	MATI MUMBAI
AGRA	COCHINHOUSE	PANAJI (GOA)
AJMER	CURDGAON	RATHIKA
AMMEDABAD	GVALIDR.	PORT BLAIR
AIYAPPL	HYDERABAD	PRATADHARAJ (ALLAMAHAD)
ALIGARH	IMPAHL	FUDUCHERRY
ALMORA (UTTARAKHAND)	INDORE	FUNE
ANANTPUR (ANDHRA PRADESH)	ITANAGAR	RAJGUR
CHHATTEPSOTI	JASALPUR	RAJKOT
CHEMBRAJINACAR (ADRANGABAD)	JASIPUR	RAMCH.
CHIKKAMARSHALA	JAMMU	SAMEALPUR
BENGALURU	JODHPUR	SHILLONG
BAREILLY	KOCHI	SHIMLA
BIGOPAL	KORRAT	SILOM
BILASPUR (CHHATTISGARH)	KAROL	ST. LUCIA
CHAMOGARH	KOCHI	THIRUVALL
CHENNAI	KORTMA	TRINACAR (UTTARAKHAND)
COIMBATORE	KOKEATA	THANE
CUTTACK	KOZHIKODE (CALCUT)	THIRUVANANTHAPURAM
DEMRAJUN	LEH	TIRUCHIRAPPALLI
DELHI	LUCKNOW	TIRUPATI
DHARANIMALA	LUDHIANA	TOAPSUR
DHARMSAHLA	MADRAS	VADAKKAN
DIEPUS	MANDI	VELLORE
FARIDABAD	MOMBAT	VEERATADA
GANGTOP	MYSORE	THIRUMARATHAM
GAYA	NAGPUR	THIRUMUKKONDA (VARANGAL URBAN)
GAUTAM BUDDH NAGAR		

Applicants should note that there will be a ceiling on the number of candidacies offered to each of the centres except Chandigarh, Dehradoon, Kolkata and Nagpur. Allocation of Centres will be on the first-come-first-serve 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.

N.B.: Notwithstanding the aforesaid provision, Commission reserves the right to change the Centres at their discretion if the situation demands.

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

2. CONDITIONS OF ELIGIBILITY

(a) Nationality : A candidate must be unmarried male/female and must 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 not, however, be necessary in the case of candidates who are Gorkha subjects of Nepal.

(b) Age Limits, Sex and Marital Status:

Only unmarried male/female candidates born not earlier than 2nd July, 2004 and not later than 01st July, 2009 are eligible.

The date of birth accepted by the Commission is that entered in the Matriculation or Secondary School Leaving 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 must be certified by the creper authority of the University or in the Secondary School Examination or an equivalent examination certificates. These certificates are required to be submitted only the declaration of the result of the written part of the examination. No other document relating to age like birth certificates, 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.

NOTE 1: Candidates should note that only the date of birth as recorded in the Matriculation/ Secondary School Examination Certificates available on 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 and entered in the records of the Commission for the purpose of admission to an Examination, no change will be allowed subsequently or at any subsequent examination on any ground whatsoever.

All communication in this regard should contain the following particulars:-

1. NAME AND YEAR OF THE EXAMINATION
2. REGISTRATION ID (RID)
3. ROLL NUMBER (IF RECEIVED)
4. NAME OF CANDIDATE (IN FULL AND IN BLOCK LETTERS)
5. COMPLETE POSTAL ADDRESS AS GIVEN IN THE APPLICATION
6. VALID AND ACTIVE EMAIL ID.

NOTE 3: The candidate should exercise due care while entering their date of birth in the magazine section of the Online Application Form for the Examination. 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.

NOTE 4: The candidates should also note that no addition/deletion/any changes are allowed in online application form in the NDA & NA Examination in any circumstances once it is submitted after the closure of the window for modification of application as detailed in para 6 below under the section 'How to Apply'.

NOTE 5: Candidates must undertake not to marry until they complete their full training. A candidate who marries subsequent to the date of his 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 by the Government.

(c) Educational Qualifications

- (i) For Army Wing of National Defence Academy :—12th Class pass of the 10+2 pattern of School Education or equivalent examination conducted by a State Education Board or a University.
- (ii) For Air Force and Naval Wings of National Defence Academy and for the 10+2 Cadet Entry Scheme at the Indian Naval Academy :—12th Class pass with Physics, Chemistry and Mathematics of the 10+2 pattern of School Education or equivalent conducted by a State Education Board or a University.

Candidates who are appearing in the 12th Class under the 10+2 pattern of School Education or equivalent examination can also apply for this examination.

Such candidates who qualify the SSB interview but could not produce Matriculation/10+2 or equivalent certificate in original at the time of SSB interview should forward duly self attested Photo copies to 'Directorate General of Recruiting, Army HQ, West Block II, G.K. Puram, New Delhi-110066' and for Naval Academy candidates to 'Naval Headquarters, DNGQ, GSAU Section, Room No. 204, C Wing, Intra Bheem, New Delhi-110011' by 10th December, 2025 failing which their candidature will be cancelled. All other candidates who have produced their Matriculation and 10+2 pass or equivalent

certificates in original at the time of attending the SSB interview and have got the same verified by the SSB authorities are not required to submit the same to Army HQ or Naval HQ as the case may be. Certificates in original issued by the Principals of the Institutions are also acceptable in cases where Boards/Universities have not yet issued certificates. Certified true copies/photostatic copies of such certificates will not be accepted.

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 possesses qualifications the standard of which, in the opinion of the Commission, justifies his admission to the examination.

NOTE 1 : Candidates appearing in the fifth class exam are not eligible for this examination.

NOTE 2 : These candidates who have yet to qualify in the 12th class or equivalent examination and are allowed to appear in the CPSC Examination should note that this is only a special concession given to them. They are required to submit proof of passing the 12th class or equivalent examination by the prescribed date (i.e. 15th December, 2023) and no request for extending this date will be entertained on the grounds of late conduct of Board/University Examination, delay in declaration of results or any other ground whatsoever.

NOTE 3 : Candidates who are debarred by the Ministry of Defense from holding any type of Commission in the Defense Services shall not be eligible for admission to the examination and if admitted, their candidature will be canceled.

NOTE 4 : These candidates, who have failed CPSC/TAPT earlier, are now eligible for Air Force in Ground Duty branches if they fill their willingness in the Online Application Form available at the Commission's website.

(d) Physical Standards:

Candidates must be physically fit according to physical standards for admission to National Defense Academy and Naval Academy Examination (I), 2023 as per guidelines given in Annexure-II.

(e) A candidate who has resigned or withdrawn on disciplinary grounds from any of the training academies of Armed Forces is not eligible to apply.

4. FEE:

Candidates (including SC/ST candidate/female candidates / Ward of PWDs/WCDs/DRs specified in Note 2 below who are exempted from payment of fee) are required to pay a fee of Rs. 100/- (Rupees one hundred only); either by remitting the money in any Branch of State Bank of India by cash, or by using Visa/Master/RuPay Credit/Debit Card/UPI Payment or by using internet banking of any Bank.

Note 5 : Applicants who opt for "Pay by Cash" mode, should print the system generated Pay-Inviting during Part-II registration and deposit the fee at the counter of SBI Branch on the next morning day only. "Pay-by-Cash" mode action will be discontinued at 22:59 hours of 28/12/2023 in one day before the closing date; however, applicants who have generated their Pay-Inviting before it is discontinued may pay at the counter of SBI Branch

during banking hours on the closing date. Such applicants who are unable to pay by cash on the closing date i.e. during banking hours at SBI Branch, for reason whatsoever, even if holding a valid Pay-in-Slip, will have no other option but to opt for online Debit/Credit Card/UPI Payment or Internet Banking.

Payments made on the closing date i.e. till 6.00 P.M. of 21.12.2024.

N.B. 2 : 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 permission for fee is obtained) shall be summarily rejected.

N.B. 3 : Fee once paid shall not be refunded under any circumstances nor can the fee be held in reserve for any other examination or selection.

N.B. 4 : For the applicants in whose case payment 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's 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.

NOTE-1 : Candidates belonging to Scheduled Castes/Scheduled Tribes and those specified in Note 2 below are not required to pay any fee. No fee exemption is, however, available to OBC candidates and they are required to pay the full prescribed fee.

NOTE-2 : The Wards of serving/junior Commissioned Officers/Non-Commissioned Officers/Other Ranks of Army and equivalent ranks in the Indian Navy/Indian Air Force are also not required to pay the prescribed fee if they are studying in Military School (formerly known as King George's School)/Sainik School run by Sainik Schools Society.

[N.B. : A certificate of eligibility for fee exemption is required to be obtained by all such candidates from the Principals concerned individually and produced for verification at the time of SSB Test/interview by the candidates who are declared qualified for the SSB Test/interview.]

4. HOW TO APPLY

Candidates are required to apply online by using the website [ssc.nic.in](http://www.ssc.nic.in). A candidate who is willing to apply for National Defence Academy and Naval Academy Examination shall be required to apply online and submit the requisite information and supporting documents towards various claims, such as date of birth, educational qualifications, etc. as may be sought by the Commission alongwith the Registration and Online Application Form. For detailed instructions for filling up the form, the Notice for National Defence Academy and Naval Academy Examination 2025 may be referred. The failure to provide the required information/documents alongwith the Online Application Form or within the mentioned-must, if any, provided by the Commission will entail cancellation of candidature for the examination.

Registration has to be done only once in life time. This can be done anytime throughout the year. If the candidate is already registered, he/she can proceed straightway

for filling up the online application for the examination.

Modification in Registration Profile:

In case, the candidate wants to effect any change in his/her Registration profile, it shall be allowed only once in the timeline after the registration at Registration platform. The option to change in Registration profile date shall be available till expiry of 7 days from the next day after the issuance of application number of his/her first final application for any Examination of the Commission. In case, the candidate after registration applies for the first time in that examination; last date of consideration of Registration would be 07.01.2026.

Modification in application form (Other than Registration Profile):

The Commission has also decided to extend the facility of making correction(s) in any field(s) of the application form for this examination from next day of the closure of the application number of the Commission. This window will remain open for 7 days from the date of opening of the same i.e. from 01.01.2026 to 07.01.2026. In case a candidate wants to carry out any change in his/her Registration profile during this period, then he/she should login to the Registration platform and do the needed correction(s). In other words, no change in the Registration profile can be made by visiting the window for Modification in application form.

The candidates will not be allowed to withdraw their application after the submission of the same.

NOTE-1: No genuine representations etc. shall be submitted by the Commission in respect of correcting details that are required to be filled up by the candidate by ensuring due diligence and caution as the timely completion of examination process is of paramount importance.

NOTE-2: Candidate should also have details of one photo ID viz. Aadhar Card/ Voter Card/ PAN Card/ Passport/ Driving License/ School Photo ID/ Any other photo ID Card issued by the State/Central Government. The details of this photo ID will have to be provided by the candidate while filling up the online application form. The same photo ID card will also have to be uploaded with the Online Application Form. This photo ID will be used for all future referencing and the candidate is advised to carry this ID while appearing for examination/SSB.

NOTE-3 : All candidates whether already in Government Service including candidates serving in the Armed Forces, Officers (including boys and artisans apprentices) of the Indian Navy, Cadets of Rashtriya Indian Military College (previously known as Sainik School, Dehradun), Students of Rashtriya Military Schools (formerly known as Military Schools) and Sainik Schools run by Sainik Schools Society, Government owned industrial undertakings or other similar organisations or in private employment should apply online through the Commission.

(a) 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; (b) Candidates serving in the Armed Forces, Officers (including boys and artisans apprentices) of the Indian Navy; and (c) Cadets of Rashtriya Indian Military College (previously known as Sainik School, Dehra Dun), Students of Military Schools formerly known as King George's Schools and Sainik Schools run by Sainik

Schools Society are required to inform their Head of Office/Department, Commanding Officer, Principals of College/School concerned, as the case may be, in writing that they have applied for this examination. Candidates should note that in case a communication is received by the Commission from their employer/authority concerned withholding permission to the candidate applying for/submitting at the examination, their applications will be liable to be rejected/candidates will be liable to be cancelled.

NOTE-4: WHILE FILLING IN THE APPLICATION FORM, THE CANDIDATE SHOULD CAREFULLY DECIDE ABOUT HIS CHOICE FOR THE CENTRE FOR THE EXAMINATION.

IF ANY CANDIDATE APPEARS AT A CENTRE OTHER THAN THE ONE INDICATED BY THE COMMISSION IN HIS E. ADMISSION CERTIFICATE, THE PAPERS OF SUCH A CANDIDATE WILL NOT BE VALUED AND HIS CANDIDATURE WILL BE LIABLE TO CANCELLATION.

NOTE-5 : 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 ALONG WITH THEIR APPLICATIONS ANY CERTIFICATE IN SUPPORT OF THEIR CLAIMS REGARDING AGE, EDUCATIONAL QUALIFICATIONS, SCHEDULED CASTES/SCHEDULED TRIBES/OTHER BACKWARD CLASSES AND FEE REMISSION ETC EXCEPT THE PHOTO ID CARD. THEY SHOULD THEREFORE ENSURE THAT THEY FULFIL ALL THE ELIGIBILITY CONDITIONS FOR ADMISSION TO THE EXAMINATION. THEIR ADMISSION TO THE EXAMINATION WILL ALSO THEREFORE BE PURELY PROVISIONAL. IF ON VERIFICATION AT ANY LATER DATE IT IS FOUND THAT THEY DO NOT FULFIL ALL ELIGIBILITY CONDITIONS, THEIR CANDIDATURE WILL BE CANCELLED. THE RESULT OF THE WRITTEN PART OF THE EXAMINATION IS LIKELY TO BE DECLARED IN THE MONTH OF May, 2025. All the candidates who have successfully qualified in the written examination are required to register themselves online on Directorate General of Recruiting website www.mhrdrecruit.gov.in, with the same E-mail ID as provided in TPSC while filing CPSC online application. Candidates must ensure that their email IDs given in their online applications are valid and active. These candidates would then be allotted Selection Centers through the aforesaid website. In case of any problems/questions, candidates should contact Directorate General of Recruiting on the telephone numbers given on their website or through feedback / query module after logging on to their profile.

NOTE-6 : CANDIDATES WHO HAVE PASSED WRITTEN TEST ARE NOT REQUIRED TO SUBMIT THEIR ORIGINAL CERTIFICATE OF AGE AND EDUCATIONAL QUALIFICATION EITHER TO DIRECTORATE GENERAL OF RECRUITING, ARMY HQ, WEST BLOCK-II, RK PURAM, NEW DELHI-110066 OR TO NAVAL HEADQUARTERS, DMFR, CHINNAPURAM, C WING, SEWA BHAWAN, NEW DELHI-110011.

ALL CANDIDATES CALLED FOR SSB INTERVIEW MUST CARRY THEIR ORIGINAL MATRICULATION CERTIFICATE OR EQUIVALENT EXAMINATION CERTIFICATE TO THE SERVICES SELECTION BOARD (SSB). ORIGINALS WILL HAVE TO BE PRODUCED BY THE CANDIDATES WHO QUALIFY AT THE SSB INTERVIEW SOON AFTER THE INTERVIEW. THE ORIGINALS WILL BE RETURNED AFTER VERIFICATION. THOSE CANDIDATES WHO HAVE ALREADY PASSED 10+2 EXAMINATION MUST CARRY THEIR ORIGINAL 10+2 PAPER CERTIFICATE OR MARKS SHEET FOR THE SSB INTERVIEW. IF ANY OF THEIR CLAIMS IS FOUND TO BE INCORRECT 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, uncooperative under RQ to be guilty of:-

- [i] 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
- [ii] Impersonation; or
- [iii] pressuring impersonation by any person; or
- [iv] submitting fabricated/incorrect documents or documents which have been tampered with; or
- [v] uploading irrelevant or incorrect photo/signature in the application form in place of actual photo/signature;
- [vi] Making statements which are incorrect or false or suppressing material information; or
- [vii] 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
 - (iv) being in possession of or using unfair means during the examination; or
 - (v) writing answers on the drawing answer sheets or irrelevant matter in the answer; or
- [viii] misbehaving in the examination hall including using of the mobile, growing fellow examinee to harass examination, creating a disorderly scene and the like; or
- [ix] harassing, threatening or doing bodily harm to the staff employed by the Commission for the conduct of their examinations; or
- [x] being in possession of or using any mobile phone, (even in switched-off mode), paper or any electronic equipment or programmable device or storage media like pen drive, smart/Digital 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
- [xi] violating any of the instructions issued to candidates along with their admission certificates permitting them to take the examination; or
- [xii] 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:-

(ii) by the Commission, from any examination or selection held by them;
(iii) by the Central Government from any employment under them; and
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 the purpose, into consideration.

Any person who is found by the Commission or responsible officer HQ to be guilty of colluding with a candidate (x) in committing or abetting the commission of any of the misconduct listed at Clause (x) to (y) above render himself/herself liable to action in terms of the Clause (y).

Note: If a candidate is found to be in possession or using unfair means, may not be allowed to continue in the test room as soon as the incident comes to notice of the Examination Functionaries and the action against the candidate 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.

5. LAST DATE FOR SUBMISSION OF APPLICATIONS:

(i) The Online Applications can be filed upto 24- December, 2024 till 6:00 PM.

6. TRAVELLING ALLOWANCE:

Candidates appearing for IES interview for the first time, for a particular type of Commission i.e. Permanent or Short Service, shall be entitled for AC III Tier to and fro railway fare or bus fare including reservation cum sleeper charges within the Indian limits. Candidates who apply again for the same type of Commission will not be entitled to travelling allowance on any subsequent occasions.

7. CORRESPONDENCE WITH THE COMMISSION/ ARMY / NAVAL / AIR HEADQUARTERS:

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

(i) The eligible candidates shall be issued an e-Admit Card Seven Days before the commencement of the examination. The e-Admit Card will be made available in the UPSC website (upsc.gov.in) for being downloaded by candidates. No Admit Card will be sent by post. For downloading the e-Admit Card the candidate must have his vital parameters like EID & Date of Birth or Roll No. (If received) & Date of Birth or name, father's name & Date of Birth available with him.

(ii) If a candidate does not receive his e-Admit Card or any other communication regarding his candidature for the examination before the commencement of the examination, he 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 over Phone Nos. 011-23335271/011-23335255/011-23309242 (Ext. 4123, 4120). In case no communication is

received in the Commission's Office from the candidate regarding non-receipt of his e-Admit Card before the examination, he himself will be solely responsible for non-receipt of his e-Admit Card.

(ii) The candidate will ordinarily be allowed to take the examination unless he holds a certificate of admission for the examination. On receipt of e-Admit Card, check it carefully and bring discrepancies, if any, to the notice of the UPSC immediately. The courses to which the candidates are admitted will be according to their eligibility as per educational qualifications for different courses and the preferences given by the candidate.

The candidate 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) If a candidate receives an e-admit card in respect of some other candidate on account of processing error, it should be notified to the Commission with a request to issue the correct e-Admit Card. Candidates may note that they will not be allowed to take the examination on the strength of an e-Admit Card issued in respect of another candidate.

(iv) The decision of the Commission as to the acceptance of the application of a candidate and his eligibility or otherwise for admission to the Examination shall be final.

(v) Candidates should note that the name in the e-Admit Card in some cases, may be abbreviated due to technical reasons.

(vi) Candidates must ensure that their email Ids given in their online applications are valid and active.

IMPORTANT : All Communications to the Commission should invariably contain the following particulars.

1. Name and year of the examination.
2. Registration ID (RID).
3. Roll Number [if awarded].
4. Name of candidate [in full and in block letters].
5. Postal Address as given in the application.

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 full name and roll number, it will be ignored and no action will be taken thereon. Candidates recommended by the Commission for interview by the Services Selection Board who have changed their address subsequent to the submission of their applications for the examination should immediately after announcement of the result of the written part of the examination notify the changed address also to :-

For candidates with Army as first choice—Army Headquarters, A.G's Branch, RTO (NDA Expy), West Block II, Wing I, R.E. Parade, New Delhi-110046, Phone No. 26175472

For candidates with Navy/Naval Academy as first choice— Naval Headquarters,

Directorate of Personnel & Recruitment, O.I&R Section, R. No. 204, C Wing, Sector 21A, New Delhi-110011. Phone No. 23010297/23011252

For candidates with Air Force as first choice—Dir. of Personnel (Officers), Air Headquarters, CVO Room No. 888, 'A' Block, Defence Office Complex, Kasturba Gandhi Marg, New Delhi-110011. Phone No. 23010251 Email 7645/7646/7610.

FAILURE TO COMPLY WITH THIS INSTRUCTION WILL DEPRIVE THE CANDIDATE OF ANY CLAIM TO CONSIDERATION IN THE EVENT OF HIS NOT RECEIVING THE SUMMONS LETTER FOR INTERVIEW BY THE SERVICES SELECTION BOARD.

AFTER HAVING CLEARED THE WRITTEN EXAMINATION THE CANDIDATES SHOULD LOG ON TO THE FOLLOWING WEBSITES FOR THEIR IIS CENTRE & DATE OF INTERVIEW.—

[www.joinindianarmy.nic.in](http://joinindianarmy.nic.in) or [www.joinindiannavy.gov.in](http://joinindiannavy.gov.in)

The candidates with Air Force as first choice are also to register on [www.joinindianairforce.nic.in](http://joinindianairforce.nic.in) for AFSS and date selection.

Candidates whose names have been recommended for interview by the Services Selection Board should address queries or requests, if any, relating to their interview or visit website of respective service headquarters after 30 days from the announcement of written results as follows—

For candidates with Army as first choice—Army Headquarters, AG's Branch, RTG (INDIA STOREY), West Block-II, Wing-1, R.K. Puram, New Delhi - 110 046. Phone No. 26176478 or joinindianarmy.nic.in

For candidates with Navy/Naval Academy as first choice—Naval Headquarters, Directorate of Personnel & Recruitment, O.I & R Section, Room No. 204, C Wing, Sector 21A, New Delhi-110011. Phone No. 23011282/23010181 Email officer@navy.gov.in or joinindiannavy.gov.in

For candidates with Air Force as first choice—Dir. of Personnel (Officers), Air Headquarters, CVO Room No. 888, 'A' Block, Defence Office Complex, Kasturba Gandhi Marg, New Delhi-110011. Phone No. 23010251 Email 7645/7646/7610.

Candidates are required to report for IIS interview on the date intimated to them in the call to letter for interview. Requests for postponing interview will only be considered in exceptional circumstances and that too if it is administratively convenient for which Army Headquarters will be the sole deciding authority. Such requests should be addressed to the Administrative Officer of the Selection Centre from where the call letter for interview has been received. No action will be taken on letters received by Army/Army/Air HQs. IIS interview for the candidates qualified in the written examination is likely to be held during the months of July, 2026 to September, 2026 as per suitable to Examining Directorate. For all queries regarding Merit list, joining instructions and any other relevant information regarding selection process, please visit website [www.joinindianarmy.nic.in](http://joinindianarmy.nic.in).

9. 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 at their discretion. Such candidates shall appear before a Services Selection Board for Intelligence and Personality Test where candidates for the Army/Navy wings of the NDA and 10+2 Cadet Entry Scheme of Indian Naval Academy will be assessed on Officers Personality and those for the Air Force in addition to the above will have to qualify Computerized Pilot Selection System (CPSS). Candidates with Air Force as one of the choice would also undergo CPSS if they qualify SSB and are willing.

TWO-STAGE SELECTION PROCEDURE

The two-stage selection procedure based on Psychological Aptitude Test and Intelligence Test has been introduced at Selection Centres/Air Force Selection Boards/Naval Selection Boards. All the candidates will be put to stage-one test on first day of reporting at Selection Centres/Air Force Selection Boards/Naval Selection Boards. Only those candidates who qualify at stage one will be admitted to the second stage/remaining tests. Those candidates who qualify stage II will be required to submit the Original Certificates along with one photocopy each of: (i) Original Matriculation pass certificate or equivalent in support of date of birth. (ii) Original 10+2 pass certificate or equivalent in support of educational qualification.

Candidates who appear before the Services Selection Board and undergo the test there, will do so 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. Parents or guardians of the candidate will be required to sign a certificate to this effect.

To be acceptable, candidates for the Army/Navy/Naval Academy and Air Force should secure the minimum qualifying marks separately in (i) Written examination as fixed by the Commission at their discretion and (ii) Officer Personality Test as fixed by the Services Selection Board at their discretion. Over and above candidates for the Air Force, and all the SSB qualified candidates as per their wings/area, eligibility and preference for Flying Branch of Air Force should separately qualify the CPSS.

Subject to these conditions the qualified candidates will then be placed on a single combined list on the basis of total marks secured by them in the Written Examination and the Services Selection Board Tests. The final allocation/admission for admission to the Army, Navy, Air Force of the National Defence Academy and 10+2 Cadet Entry Scheme of Indian Naval Academy will be made upto the number of vacancies available subject to eligibility, medical fitness and merit/rank/Preference of the candidates. The candidates who are eligible to be admitted to multiple Services/Courses will be considered for allocation/admission with reference to their order of preference and in the event of their final allocation/ admission to one Service/Course, they will not be considered for admission to other remaining Services/Courses.

N.B.- EVERY CANDIDATE FOR THE FLYING BRANCH OF AIR FORCE IS GIVEN COMPUTERISED PILOT SELECTION SYSTEM (CPSS) (PILOT APTITUDE TEST) ONLY ONCE. THE GRADE SECURED BY HIM AT THE FIRST TEST WILL THEREFORE HOLD GOOD FOR EVERY SUBSEQUENT INTERVIEW HE HAS WITH THE AIR FORCE SELECTION BOARD. A CANDIDATE WHO FAILS IN THE CPSS CANNOT APPLY FOR ADMISSION TO THE NATIONAL DEFENCE ACADEMY EXAMINATION FOR THE FLYING BRANCH OF AIR FORCE WING OR GENERAL DUTIES (PILOT) BRANCH OR NAVAL AIR ARM.

Candidates who have been given the Computerised Pilot Selection System (CPSS) for any previous NDA course should submit their application for this examination for the Air Force Wing side if they have been notified as having qualified in CPSS. In case a candidate has failed in CPSS/retested for CPSS for being RWC, the candidate would be considered for Ground Duty branch of IAF, Navy, Army and NATAC as per his choice.

The form and manner of communication of the result of the examination to individual candidates shall be decided by the Commission at their discretion and the Commission will not enter into correspondence with them regarding the result.

Success in the examination confers no right of admission to the Academy. A candidate must satisfy the appointing authority that he is suitable in all respects for admission to the Academy.

10. DISQUALIFICATION FOR ADMISSION TO THE TRAINING COURSE.

Candidates who were admitted to an earlier course at the National Defence Academy, or to the 10 + 2 Cadet Entry Scheme of Indian Naval Academy but were removed there from for lack of officer-like qualities or on disciplinary grounds will not be admitted to the Academy.

Candidates who were previously withdrawn from the National Defence Academy or Indian Naval Academy on medical grounds or left the above Academy voluntarily are however, eligible for admission to the Academy provided they satisfy the medical and other prescribed conditions.

11. The details regarding (a) the scheme and criteria of the examination, (b) guidelines for filling up the online Application Form (c) General Instructions to candidates for objective type tests.

(d) Physical standards for admission to the National Defence Academy and Naval Academy and (e) Brief particulars of the service etc. for candidates joining the National Defence Academy and Naval Academy are given in Appendices I, II, III, IV and V respectively.

(Bhinder Kumar Mandel)
Under Secretary
Union Public Service Commission

APPENDIX
(The Scheme and Syllabus of Examination)

A. SCHEME OF EXAMINATION

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

Subject	Code	Duration	Maximum Marks
Mathematics	01	2½ Hours	100
General Ability Test	02	2½ Hours	600
	Total		700
SSA Test Interview			900

2. THE PAPERS IN ALL THE SUBJECTS WILL CONSIST OF OBJECTIVE TYPE QUESTIONS ONLY. THE QUESTION PAPERS (TEST BOOKLETS) OF MATHEMATICS AND PART "B" OF GENERAL ABILITY TEST WILL BE SET INDIVIDUALLY IN HINDI AS WELL AS ENGLISH.

1. In the question papers, wherever necessary, questions involving the metric system of Weights and Measures only will be set.
2. 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.
3. The Commission has discretion to fix qualifying marks in any or all the subjects of the examination.
4. The candidates are not permitted to use calculator or Mathematical or logarithmic table for answering objective type papers (test booklet). They should not therefore, bring the same inside the Examination Hall.

B. SYLLABUS OF THE EXAMINATION

PAPER-I

MATHEMATICS
(Code No. 01)
(Maximum Marks-200)

I. ALGEBRA

Concept of set, operations on sets, Venn Diagrams, De Morgan laws, Cartesian product, relation, equivalence relation.

Representation of real numbers on a line. Complex numbers— basic properties, modulus, argument, cube roots of unity. Binary system of numbers. Conversion of a number in decimal

systems to binary systems and vice-versa. Arithmetic, Geometric and Harmonic progressions. Quadratic equations with real coefficients. Solution of linear equations of two variables by graphic. Permutation and Combination. Binomial Theorem and its applications. Logarithms and their applications.

2. MATRICES AND DETERMINANTS:

Type of matrices, operations on matrices. Determinant of a matrix, basic properties of determinants. Adjoint and inverse of a square matrix. Applications—Solution of a system of linear equations in two or three unknowns by Cramer's rule and by Matrix Method.

3. TRIGONOMETRY:

Angles and their measures in degrees and in radians. Trigonometrical ratios. Trigonometric identities—Sum and difference formulae. Multiple and Sub-multiple angles. Inverse trigonometric functions. Applications—heights and distances, properties of triangles.

4. ANALYTICAL GEOMETRY OF TWO AND THREE DIMENSIONS:

Rectangular Cartesian Coordinate system. Distance formula. Equation of a line in various forms. Angle between two lines. Distance of a point from a line. Equation of a circle in standard and in general form. Standard forms of parabola, ellipse and hyperbola. Eccentricity and axis of a conic. Point in a three dimensional space, distance between two points. Direction cosines and direction ratios. Equation two points. Direction cosines and direction ratios. Equation of a plane and a line in various forms. Angle between two lines and angle between two planes. Equation of a sphere.

5. DIFFERENTIAL CALCULUS:

Concept of a real valued function—domain, range and graph of a function. Composite functions, one to one, onto and inverse functions. Notion of limit. Standard limits—examples. Continuity of functions—examples, algebraic operations on continuous functions. Derivative of function at a point, geometrical and physical interpretation of a derivative—applications. Derivatives of sum, product and quotient of functions; derivative of a function with respect to another function; derivative of a composite function. Second order derivatives. Increasing and decreasing functions. Application of derivatives in problems of maxima and minima.

6. INTEGRAL CALCULUS AND DIFFERENTIAL EQUATIONS:

Integration as inverse of differentiation, integration by substitution and by parts, standard integrals involving algebraic expressions, trigonometric, exponential and hyperbolic functions. Evaluation of definite integrals—determination of area of plane regions bounded by curves—applications.

Definition of order and degree of a differential equation, formation of a differential equation by examples. General and particular solutions of a differential equation, solution of first order and first degree differential equations of various types—examples. Application in problems of growth and decay.

T. VECTOR ALGEBRA:

Vectors in two and three dimensions, magnitude and direction of a vector, Unit and null vectors, addition of vectors, scalar multiplication of a vector, scalar product or dot product of two vectors. Vector product or cross product of two vectors. Applications—work done by a force and moment of a force and in geometrical problems.

S. STATISTICS AND PROBABILITY:

Statistics: Classification of data. Frequency distribution, cumulative Frequency distribution—examples. Graphical representation—Histogram, Pie Chart, Frequency polygon—examples. Measures of Central tendency—Mean, median and mode. Variance and standard deviation—determination and comparison. Correlation and regression.

Probability: Random experiment, outcomes and associated sample space, mutually exclusive and exhaustive events, impossible and certain events. Union and intersection of events. Complementary, elementary and composite events. Definition of probability—classical and statistical—examples. Elementary theorems on probability—simple problems. Conditional probability, Bayes' theorem—simple problems. Random variables as function on a sample space. Binomial distribution, examples of random experiments giving rise to binomial distribution.

PAPER-II

GENERAL ABILITY TEST

(Code No. 12)

(Maximum Marks—600)

Part 'A'—ENGLISH

(Maximum Marks—200)

The question paper in English will be designed to test the candidate's understanding of English and common like use of words. The syllabus covers various aspects like Grammar and usage, vocabulary, comprehension and coherence is intended set to test the candidate's proficiency in English.

Part 'B'—GENERAL KNOWLEDGE

(Maximum Marks—400)

The question paper on General Knowledge will broadly cover the subjects: Physics, Chemistry, General Science, Social Studies, Geography and Current Events.

The syllabus given below is designed to indicate the scope of these subjects included in this paper. The topics mentioned are not to be regarded as exhaustive and questions on topics of similar nature not specifically mentioned in the syllabus may also be asked. Candidate's answers are expected to show their knowledge and intelligent understanding of the subject.

Section 'A' (Physics)

Physical Properties and States of Matter: Mass, Weight, Volume, Density and Specific Gravity, Principle of Archimedes, Pressure Barometer.

Motion of objects, Velocity and Acceleration, Newton's Law of Motion, Force and Momentum, Parallelogram of Forces, Stability and Equilibrium of bodies, Gravitation, elementary ideas of work, Power and Energy.

Effect of Heat, Measurement of Temperature and Heat, change of State and Latent Heat, Modes of Transference of Heat.

Sound waves and their properties, Simple musical instruments.

Refraction of Light, Reflection and refraction, Spherical mirrors and Lenses, Human Eye.

Natural and Artificial Magnets, Properties of a Magnet, Earth as a Magnet.

Static and Current Electricity, conductors and non-conductors, Ohm's Law; Simple Electrical Circuits, Heating, Lighting and Magnetic effects of Current, Measurement of Electrical Power, Primary and Secondary Cells, Use of X-Rays.

General Principles in the working of the following:

Simple Pendulum, Simple Pulleys, Siphon, Lever, Pulley, Hydrometer, Pressure Cooker, Thermos Flask, Gramophone, Telegraph, Telephone, Telescopc, Microscope, Merlin's Compass, Lightning Conduits, Safety Fuse.

Secton 'B' (Chemistry)

Physical and Chemical changes, Elements, Mixture and Compounds, Symbols, Formulae and simple Chemical Equations, Law of Chemical Combination (including problems). Properties of Air and Water.

Preparation and Properties of Hydrogen, Oxygen, Nitrogen and Carbon dioxide, Oxidation and Reduction.

Acids, Bases and salts.

Carbon—different forms.

Furnaces—Natural and Artificial.

Material used in the preparation of substances like Soap, Glass, Ink, Paper, Cement, Paints, Safety Matches and Talc-Powder.

Elementary idea about the structure of Atom, Atomic Equivalent and Molecular Weights, Valency.

Secton 'C' (General Science)

Difference between the living and non-living.

Basis of Life—Cells, Protoplasm and Tissues.

Growth and Reproduction in Plants and Animals.

Elementary knowledge of Human Body and its important organs.

Common Epidemics, their causes and prevention.

Food—Source of energy for man, Concepts of Bad, Balanced Diet.

The Solar System—Motions and Orbits, Satellites.

Achievements of Great Scientists.

Section D (History, Freedom Movement etc.)

A broad survey of Indian History, with emphasis on Culture and Civilization.

Freedom Movement in India.

Elementary study of Indian Constitution and Administration.

Elementary knowledge of Five Year Plans of India.

Panchayati Raj, Co-operation and Community Development.

Hinduism, Sanatana, National Integration and Welfare State. Basic Teachings of Mahatma Gandhi.

Forces shaping the modern world; Renaissance, Exploration and Discovery; War of American Independence, French Revolution, Industrial Revolution and Russian Revolution; Impact of Science and Technology on Society; Concept of one World, United Nations, Panchsheel, Democracy, Socialism and Communism; Role of India in the present world.

Section E (Geography)

The Earth, its shape and size, Latitudes and Longitudes, Concept of time, International Date Line, Movements of Earth and their effects.

Origin of Earth, Rocks and their classification; Weathering—Mechanical and Chemical, Earthquakes and Volcanoes.

Ocean Currents and Tides.

Atmosphere and its composition; Temperature and Atmospheric Pressure; Planetary Winds; Cyclones and Anti-cyclones; Humidity; Condensation and Precipitation; Types of Climate; Major Natural regions of the World.

Regional Geography of India—Climate, Natural resources, Mineral and Power resources; location and distribution of agricultural and industrial activities.

Important Sea ports and major sea, land and air routes of India. Major Rivers of India and Exports of India.

Section 'F' (Current Events)

Knowledge of important events that have happened in India in the recent years. Current important world events.

Prominent personalities—both Indian and International including those connected with cultural activities and sports.

NOTE:

Out of maximum marks assigned to part 'B' of this paper, questions on Sections 'A', 'B', 'C', 'D', 'E' and 'F' will carry approximately 22%, 15%, 10%, 20%, 22% and 10% weightage respectively.

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 viz. Picture Perception and 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 tests. 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 personality traits of Officer Like Qualities and their suitability in a candidate. Accordingly candidates are Recommended or Not Recommended at the SSB.

APPENDIX-II

INSTRUCTIONS TO THE CANDIDATES FURNISHING ONLINE APPLICATION

Candidates are required to apply online by using the website www.joiniaiia.gov.in

Salient Features of the Online Application Form are given hereunder:

- Detailed instructions for filling up Online Application are available on the above mentioned website. Candidates will be required to complete the Online Application form consisting two stages viz. Part I and Part II.
- The candidates are required to pay a fee of Rs. 100/- (Rupees: one hundred only) [except SC/ST candidates and those specified in Note 1 of Para 4 of the Notice who are exempted from payment of fee], either by depositing the money in any branch of SBI by cash or by using any Visa/Master/BanKPay Credit/Debit Card/UPI Payments or by using Internet Banking of any Bank.
- Candidates should also have details of one photo ID viz. Aadhar Card/ Voter Card/ PAN Card/ Passport/ Driving License/ School Photo ID/ Any other photo ID Card issued by the State/Central Government. The details of this photo ID will have to be provided by the candidate while filling up the online application form. The same photo ID card will also have to be uploaded with the Online Application Form. This photo ID will be used for all future referencing and the candidate is advised to carry this ID while appearing for examination.
- Before start filling up Online Application, a candidate must have his photograph and signature duly scanned in the .jpg format in such a manner that each file should not exceed 100 KB each and must not be less than 20 KB in size for the photograph and signature.
- Before start filling up Online Application, a candidate must have his photo identity card document in PDF format only. The digital size of PDF file should not exceed 500 KB and must not be less than 10 KB.
- The Online Application (Part I and II) can be filled from 11th December, 2024 to 31st December, 2024 till 6:00 PM.
- The applicants must ensure that while filling their Application Form, they are providing their valid and active E-mail Ids as the Commission may use electronic mode of communication while conducting them at different stages of examination process.
- The applicants are advised to check their e-mails at regular intervals and ensure that the email addresses ending with @mca.nic.in are directed to their inbox folder and not to the SPAM folder or any other folder.
- CANDIDATES ARE STRONGLY ADVISED TO APPLY ONLINE WELL IN TIME WITHOUT WAITING FOR THE LAST DATE FOR SUBMISSION OF ONLINE APPLICATION.**

APPENDIX-III

General Instructions to Candidates for objective type tests

I. 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.

II. Articles not permitted inside Examination Hall

Do not bring into the Examination Hall any article other than those specified above e.g. any calculator/any kind of mobile phone, Smart/Digital watches other IT Gadgets, books, bag, pens, bags above electronic or any other type of calculators.

mathematical and drawing instruments. Log Tables, stencils of maps, slide rules. Test Booksheets and rough sheets pertaining to earlier scenario(s) etc.

Possession (even in switch off mode)/use of Mobile phones, Bluetooth, papers or any other communication devices or any other incriminating material (notes on c-admit card, papers, notes 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 listed items including mobile phones/Bluetooth/papers 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/cashy 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.

- 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 (0.25) of the marks assigned to that question will be deducted as penalty.
- If a candidate gives 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.
- If a question is left blank i.e. no answer is given by the candidate, there will be no penalty for that question.

4. Under review strictly prohibited

No candidate shall copy from the papers of any other candidate nor garnish 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 punished.

6. Answer Sheet particulars

- Write with black ball pen your Centre and subject followed by test booklet series (or booklet), subject code and roll number at the appropriate space provided on the answer sheet at the top. Also write 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 unnumbered, 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 two booklets 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/sheeter/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 computerized 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 pens. Since the answer needs to be read by the candidates, by darkening the circles will be taken into account while evaluating the answer sheets on computerized machine, 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 items 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 number, 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 the circle(s) under your response.

For example, if the correct answer to item 2 is (d), then the circle containing the letter (d) is to be completely blackened with black ball pen as shown below:-

Example : (a) (b) (c) (d)

11. 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:

- i) Blacken the circle (P) under the column (Present/Absent)
- ii) Blacken the relevant circle for Test Booklet Series
- iii) Write Test Booklet Serial No.
- iv) Write the Answer Sheet Serial No. and also blacken the corresponding circles below:
- v) Append signature in the relevant column.

12. 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 once 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 unnumbered 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:

मा. राज्य Class	राज्य विषय Subject	राज्य विषय कोड Subject Code	प्रतीक्षा Roll Number
		<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

If you are, say, appearing for the examination in Delhi Council for the Mathematics Paper-I and your Roll No. is 001278, and your test booklet series is 'A' you should fill in thus, using black ball pen:

मा. राज्य Class	राज्य विषय Subject	राज्य विषय कोड Subject Code	प्रतीक्षा Roll number
10th	English	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

You should write with black ball pen the name of the series 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 Number neatly as it is in your Admission Certificate with black

ball pen in the boxes provided for this purpose. Do not omit any serial(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.

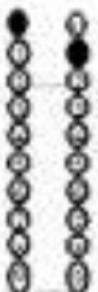
Writing and encoding of Test Booklet Series is to be done after receiving the Test Booklets and confirming the Booklet Series from the exam. For Mathematics *subject* paper of 'A' Test Booklet Series you have to encode the subject code, which is '01'. Do it thus:

2099902 (5)

English Series (5)

- (A)
- (B)
- (C)
- (D)

Time
Subject



2099902
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 thus 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 - IV

GUIDELINES FOR PHYSICAL STANDARDS FOR ADMISSION TO THE NATIONAL DEFENCE ACADEMY.

NOTE: CANDIDATES MUST BE PHYSICALLY AND MENTALLY FIT ACCORDING TO THE PRESCRIBED PHYSICAL STANDARDS. MEDICAL FITNESS CRITERIA GIVEN BELOW ARE AS PER LATEST GUIDELINES AS ON DATE OF PUBLICATION AND THESE GUIDELINES ARE SUBJECT TO REVIEW.

A NUMBER OF QUALIFIED CANDIDATES ARE REJECTED SUBSEQUENTLY ON MEDICAL GROUNDS. CANDIDATES ARE THEREFORE ADVISED IN THEIR OWN INTEREST TO GET THEMSELVES MENTALLY EXAMINED BEFORE SUBMITTING THEIR APPLICATIONS TO AVOID DISAPPOINTMENT AT THE FINAL STAGE.

1. Candidates are also advised to rectify minor deficiencies in order to avoid rejection of medical examination conducted at the Military Hospital after being recommended at the SSB.

2. Few of such commonly found defects/deficiencies are listed below:

- (a) Watery eyes
- (b) Deviated Nose/Septrum
- (c) Hydrocele/Windosis
- (d) Overweight/Underweight
- (e) Under Scrub Chair
- (f) Piles
- (g) Oxyacanthosis
- (h) Tonsillitis
- (i) Varicose veins

NOTE: Permanent body tattoos are only permitted on inner face of fingers 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 candidate will be barred from further selection. Tribes with tattoo marks on the face or body as per their existing custom and tradition will be permitted on a case to case basis. Comptt Selection Committee will be compenstated with for clearing such cases.

3. Civilian candidates appearing for all types of commission in the Armed Forces will be entitled to anti-pox-virus treatment from service sources at public expense for injuries sustained or diseases contracted during the course of their examination by the Selection Board. They will also be entitled to **in-patient treatment at public expense in the Officer's ward of a hospital** provided—

- (a) The injury is sustained during the test or.

- (b) the disease is protracted during the course of the examination by selection board and there is no suitable accommodation in local civil hospital or it is impracticable to remove the patient to the civil hospital; or

- (c) the medical board requires the candidate's admission for observation.

NOTE: They are not entitled to special nursing.

4. Medical Procedure

A candidate recommended by the Services Selection Board will undergo a medical examination by a Board of Service Medical Officers. Only those candidates will be admitted to the academy who are declared fit by the Medical Board. The proceedings of the Medical Board are confidential and will not be divulged to anyone. However, the candidate declared unfit will be informed by the President of the Medical Board and the procedure for request for an Appeal Medical Board will also be informed to the candidate.

3. Candidates declared unfit during Appeal Medical Board will be informed about the provision of Review Medical Board.

6. Medical Standards and procedures for Army, Navy and Air Force Flying Branch and General Duty Branch) are given in Annexures 'A', Annexure 'B' and Annexure 'C' respectively, which is also available at following websites:

(i) For Officers Entry into Army Medical Standards and Procedure of Medical Examination at www.jointmedicalboard.mil.in

(ii) For Officers Entry for Air Force (Flying & Ground duty branches) Medical Standards and Procedure of Medical Examination at www.afrcairforce.mil.in

(iii) For Officers Entry for Navy: Medical Standards and Medical Examination at www.jointmedicalboard.gov.in

Note: The proceedings of the Medical Board are confidential will not be divulged to anyone. Directorate General of Recruiting has no role to play in any Medical Board and procedures advised by the competent medical authority will be strictly adhered.

MEDICAL EXAMINATION OF FEMALE CANDIDATES

- General methods and principles of medical examination of female candidates will be the same as for male candidates. However, special points pertaining to Medical Examination of female candidates are given in succeeding paragraphs.
- A detailed menstrual, gynaecological and obstetric history in the form of a questionnaire is to be obtained from the candidate.
- A detailed physical and systemic examination will be carried out of the candidate and she should be examined by a Lady Medical Officer or a Lady Gynaecologist only.

4. The examination must include the following inspections:-
- internal genitalia;
 - uterus, ovaries and the peritoneum;
 - Any evidence of gross urinary incontinence or genital prolapsed outside the vulva;
 - evidence of lump breast and gynaecorrhoea.
5. In all untrained female candidates, speculum or per vaginal examination will not be carried out.
6. Ultrasonogram scan of the abdomen and pelvis is mandatory in all female candidates during the initial medical examination.
7. Any abnormality of external genitalia will be considered on merits of each case. Significant anomalies especially with male pattern of hair growth along with radiological evidence of PCOS, will be a cause for rejection.
8. Following conditions will result female candidates being declared unfit:
- Primary or secondary amenorrhoea;
 - Severe Menorrhagia or/ and severe dysmenorrhoea;
 - Bladder urinary incontinence;
 - Congenital elongation of cervix or prolapsed which comes outside the introitus even after corrective surgery;
 - Pregnancy.** Pregnancy will be a cause of rejection for NDA entry;
 - Complex ovarian cyst of any size;
 - Simple ovarian cyst more than six cm;
 - Hadenorrhosis and Adenosomyosis;
 - Submucous fibroid of any size;
 - Uteral ligament or cervical fibroid of any size causing pressure over uterus;
 - Single fibroid uterus more than three cm in diameter; fibroids more than five in number (each fibroid not more than fifteen mm in diameter) or fibroids causing distortion of endometrial cavity;
 - Congenital uterine anomalies except arcuate uterus;
 - Acute or chronic pelvic infection;
 - Disorders of sexual differentiation;
 - Any other condition will be considered on merits of each case by the Gynaecologist.

4 Following conditions will be declared as FIT -

- (a) Unilateral clear vision up to six cm.
- (b) Minimal fluid in pouch of Douglas.

Medical fitness after laparoscopic surgery or laparotomy: Candidates reporting after undergoing laparoscopy or laparotomy will be accepted as fit if she is asymptomatic, unimpaired gait is normal, histopathology of tissue removed is benign and pre-operative findings are not suggestive of malignancy. Fitness will be considered twelve weeks after laparoscopic surgery and when the wound has healed fully. Candidates will be considered fit after laparotomy one year after the surgical procedure.

Annexure A

MEDICAL STANDARDS AND PROCEDURE OF MEDICAL EXAMINATIONS FOR OFFICER ENTRANTS INTO ARMY

1. 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 whatever 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 rigours stress and strain of service conditions to perform their military duties in adverse terrain and environmental elements (land and air), in extreme 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 jeopardise lives of other members of the team during operations. Therefore only medically fit candidates are selected who are 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 exclusively 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 finalised by the input of Medical Officers. The decision of the Medical Board is final. In case of any doubt about any disease/disability/surgical disorder etc noticed during examination, the benefit of doubt will be given to State.

Medical Standards

2. 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 equipments. Such changes will be promulgated from time to time by policy issued by competent authority. Medical Officers, Spi Medical Officers and Medical Board will take appropriate decisions based on following guidelines and principles.

1. 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 and sea and air, in reduced stress, in adverse 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 viral contamination, imperfect development of any system, any congenital deformities, disease/syndrome or malformation:
 - (i) No swelling/s including tumours/cysts/medullary lymph nodes anywhere on the body. No masses or lumps anywhere on the body;
 - (ii) No hyper or hypo pigmentation or any other disease/syndrome/disability of the skin;
 - (iii) No fistula anywhere on the body;
 - (iv) No scars which can impair the functioning and cause significant disfigurement;
 - (v) No utero-vaginal malformation, atrophy anywhere on the body;
 - (vi) 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 stoma and fistulae;
 - (vii) No impairment of vision including colour perception and field of vision;
 - (viii) No hearing impairment, deformation/abnormalities in non-respiratory-auditory system;
 - (ix) No impairment of speech due to any aetiology;
 - (x) No discolouration: congenital anomaly/syndrome of the bones or cartilages of the nose, or palate, nasal polyp or disease of the nose-Pharynx, larynx and accessory sinuses. There should be normal dentition and no history of chronic tonsillitis.

- (iv) No disease/syndrome/disability of the heart, palate/cranio or gape or any disease or injury affecting the normal function of either mandibular joint.
 - (v) No disease/syndrome/disability of the heart and blood vessels incl congenital, genetic, organic and hypertension, and conduction disorders.
 - (vi) 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 allergicoimmunological conditions, connective tissue disorders, musculoskeletal deformities of chest.
 - (vii) No disease of the digestive system including any abnormality of the liver, pancreas incl endocrin, congenital, hereditary or genetic diseases; syndromes and disabilities.
 - (viii) No disease/syndrome/disability of any urological system, retroperitoneal/fat system.
 - (ix) No disease/syndrome/disability of genito-urinary system including malformations, atrophy/hypertrophy of any organ or gland.
 - (x) No active, latent or congenital retinal disease.
 - (xi) No history or evidence of mental disease, epilepsy, incontinence of urine or faeces.
 - (xii) No disease/disorder/condition of musculoskeletal system and joints and skull, spine and limbs.
 - (xiii) There is no congenital or hereditary disease/syndrome/disability.
4. Psychological examination will be carried out during SBB selection procedure. However, any abnormal traits noticed during medical examination will be a cause for rejection.
5. Based on the above mentioned guidelines usual medical conditions which lead to rejection are:
- (i) Musculoskeletal deformities of spine, chest and pelvis. Limbs e.g. scoliosis, torticollis, kyphosis, deformities of vertebrae, ribs, sternum, clavicle, other bones of skeleton, residual fractures, deformed limbs, fingers, toes and congenital deformities of spine.
 - (ii) Deformities of Limbs: Deformed limbs, toes and fingers, deformed joints like valgus, valgus varus, knock knees, bow legs, hyper mobile joints, amputated toes or fingers and shortened limbs.
 - (iii) Vision and eye: Amblyopia, hypermetropia, astigmatism; lesions of cornea, lens, retina, optic and optic nerve.

- (b) Hearing, nose, nose and throat: Sub standard hearing capability, lesions of post-synapses membranes, middle ear, deviated nasal septum, and congenital abnormalities of lips, palate, pre-auricular sinuses and lymphadenitis/oleophagy of neck. Hearing capacity should be 600 cm for Communication Voice and Forced Whispering for each ear.
- (c) Dental conditions:
- incipient pathological condition of the jaws, which are known to be progressive or recurrent.
 - Significant jaw discrepancy between upper and lower jaw which may hamper efficient mastication and/or speech will be a cause for rejection.
 - Sympathetic temporomandibular joint clicking and tenderness. A mouth opening of less than 30 mm measured at the incisal edge. Dislocation of the TMJ on wide opening.
 - All periodontal anomalies conditions.
 - Clinical diagnosis for sub excess fibrosis with or without restriction of mouth opening.
 - Past oral health status in the form of gross visible carious, periodontal pocket and/or bleeding from gums.
 - Lesser teeth: More than two mobile teeth will render the candidate unfit.
 - Cosmetic or post-traumatic malaligned surgery/trauma will be UNFIT for at least 24 weeks from the date of surgery/injury whichever is later.
 - If malocclusion of teeth is hampering efficient mastication, maintenance of oral hygiene or general nutrition or performance of duties efficiently.
- (d) Chest: Tuberous, or evidence of tuberculosis; lesions of lung, heart, muscle related lesions of chest wall.
- (e) Abdomen and genito-urinary system: Hernia, undescended testis, varicose veins, inguinal, solitary kidney, horseshoe kidney & cysts in the kidney/liver, Gall bladder stones, renal and testicle stones, lesions/deficiencies of genitourinary organs, pilon, sinus and lymphadenopathy.
- (f) Nervous system: Tremors, speech impairment and infarction.
- (g) Skin: Vitiligo, trichogramma, acne, acne dermatitis, skin infections, growth and lymphadenitis.

6 Height and Weight Standards for Fresh Conditioned Joining NDA (Army)

Age (yr)	Minimum weight for all ages	Age: 17 to 30 yr	Age: 30-40 day/30 yrs	Age: 30-40 Day/ 40 yrs	Age: Above 40 yrs
Height (cm)	Weight (kg)	Weight (kg)	Weight (kg)	Weight (kg)	Weight (kg)
148	35.3	40.1	45.3	47.8	49.0
151	35.8	40.7	45.7	47.7	49.7
153	36.3	41.4	46.4	48.4	50.4
154	36.8	41.8	47.8	49.5	51.1
154	37.3	42.5	47.7	49.5	51.6
155	37.8	42.3	48.4	50.5	52.6
156	38.4	42.9	49.9	51.2	53.3
157	38.9	42.5	49.1	51.8	54.0
158	39.4	43.2	50.4	52.8	54.8
159	40.0	43.8	51.3	53.3	55.5
159	40.5	43.5	51.5	54.8	56.3
161	41.0	45.2	52.4	54.7	57.0
162	41.6	46.8	53.1	55.4	57.8
162	42.1	47.5	53.8	56.2	58.5
164	42.7	50.3	54.5	58.8	59.3
165	43.2	52.8	55.3	57.7	60.1
166	43.8	53.5	56.8	59.4	60.9
167	44.4	54.2	58.7	60.2	61.6
168	44.9	54.9	57.4	59.5	62.4
169	45.5	55.6	58.1	60.7	63.1
169	46.1	56.3	58.8	61.4	64.0
170	46.7	57.3	59.6	62.2	64.8
171	47.2	57.7	60.4	63.8	65.6
172	47.8	58.5	61.1	65.5	66.4

- (a) The minimum height required for entry into the Armed Forces for female Candidates is 152 cm. Candidates belonging to hills of North Eastern region of India, Gorkhal and Gurkha will be accepted with a minimum height of 148 cm. An allowance for growth of 12 cm will be made for candidates below 18 yrs at the time of examination. The minimum height requirement for the Flying Branch is 163 cm. Flying Branch also requires other anthropometric standards like wing height, leg length and thigh length.
- (b) Weight for height chart given below is for all categories of personnel. This chart is prepared based on the 1951. The chart specifies the maximum 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.

standing, and bending at the Navel and level. In such cases the following criteria will have to be met:

- (i) Body Mass Index should be below 25.
- (ii) Waist Hip ratio should be below 0.9 for males and 0.8 for females.
- (iii) Waist Circumference should be less than 90 cm for males and 80 cm for females.
- (iv) All biochemical metabolic parameters should be within normal limits.

Note: The height and weight the candidates below 17 years will be followed as per guidelines by 'Indian Academy of Paediatrics growth charts for height, weight and BMI for 0-18 Years old children' available from time to time.

3. Height and Weight Standards for Male Candidates joining NDA (Army): Height requirement varies as per the *age 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 -20 yrs		Age: 10-01 day -40 yrs		Age: Above 40 yrs	
		Height (cm)	Weight (Kg)	Height (cm)	Weight (Kg)	Height (cm)	Weight (Kg)	Height (cm)	Weight (Kg)
180	38.3	31.1	45.1	47.0	50.0	51.1	52.0	53.1	54.0
140	31.8	41.7	45.7	47.7	49.7	51.7	53.7	55.7	57.7
162	36.2	43.4	46.6	48.6	50.6	51.6	53.6	55.6	57.6
141	36.9	42.0	47.0	49.1	51.1	51.1	53.1	55.1	57.1
144	37.3	42.6	47.7	49.8	51.8	51.8	53.8	55.8	57.8
142	37.8	40.1	48.4	50.3	52.3	52.3	54.3	56.3	58.3
146	38.4	40.9	49.9	51.2	53.2	53.2	55.2	57.2	59.2
137	38.9	31.5	48.7	51.9	54.0	54.0	56.0	58.0	60.0
148	39.4	40.2	51.4	52.6	54.6	54.6	56.6	58.6	60.6
139	40.3	48.8	51.1	53.1	55.1	55.1	57.1	59.1	61.1
138	40.3	49.5	51.8	54.0	56.0	56.0	58.0	60.0	62.0
150	40.8	50.1	52.4	54.7	57.0	57.0	59.0	61.0	63.0
152	40.8	50.8	53.1	55.4	57.6	57.6	59.6	61.6	63.6
151	42.1	51.5	53.8	56.2	58.5	58.5	60.5	62.5	64.5
154	42.7	52.2	54.3	56.9	59.3	59.3	61.3	63.3	65.3
158	43.2	42.9	55.3	57.7	60.1	60.1	62.1	64.1	66.1
156	43.8	53.3	56.8	59.4	61.8	61.8	63.8	65.8	67.8
157	44.4	54.2	58.7	62.2	64.6	64.6	67.6	69.6	71.6
158	44.9	54.9	57.4	59.9	62.4	62.4	65.4	67.4	69.4
159	45.5	55.6	58.1	61.7	64.2	64.2	67.2	69.2	71.2

160	46.1	56.3	78.9	81.8	82.0
161	46.7	57.0	79.6	82.2	82.5
162	47.2	57.7	80.4	84.0	85.6
163	47.8	58.5	81.1	83.8	86.4
164	48.4	59.2	81.9	84.6	87.2
165	49.1	59.9	82.6	85.3	88.1
166	49.8	60.6	83.4	86.1	88.9
167	50.2	61.4	84.1	86.9	89.7
168	50.8	62.1	84.9	87.7	90.5
169	51.4	62.8	85.7	88.5	91.4
170	52.0	63.6	86.5	89.4	92.3
171	52.6	64.3	87.3	90.2	93.1
172	53.1	65.1	88.0	91.0	94.0
173	53.8	65.8	88.8	91.8	94.8
174	54.5	66.6	89.6	92.7	95.7
175	55.1	67.4	90.4	93.5	96.6
176	55.8	68.1	91.2	94.3	97.4
177	56.4	68.9	92.0	95.1	98.3
178	57.0	69.7	92.9	96.0	99.2
179	57.7	70.5	93.7	96.9	100.1
180	58.3	71.3	94.5	97.8	101.0
181	59.0	72.1	95.4	98.6	101.9
182	59.6	72.9	96.2	99.5	102.8
183	60.3	73.7	97.0	100.4	103.7
184	60.9	74.5	97.9	101.2	104.6
185	61.6	75.3	98.7	102.1	105.5
186	62.3	76.1	99.6	103.0	106.3
187	62.9	76.9	100.4	103.9	107.2
188	63.6	77.8	101.3	104.8	108.1
189	64.3	78.6	102.2	105.7	109.0
190	65.0	79.4	103.0	106.6	109.9
191	65.7	80.3	103.9	107.6	110.8
192	66.4	81.1	104.8	108.5	112.7
193	67.1	81.9	105.7	109.4	113.6
194	67.7	82.8	106.6	109.3	114.1
195	68.4	83.7	107.5	110.3	115.1
196	69.1	84.5	108.4	112.2	116.0
197	69.7	85.4	109.3	113.1	117.0
198	70.5	86.2	110.2	114.1	118.0
199	71.1	87.1	111.1	115.0	119.0
200	71.8	88.0	112.0	116.0	120.0

20	72.7	98.9	92.9	97.0	101.0
22	73.4	99.8	93.8	97.9	102.9
23	74.2	99.7	94.8	98.9	103.9
24	74.9	99.6	95.7	99.9	104.9
25	75.6	99.5	96.7	100.9	105.1
26	76.4	99.4	97.6	101.8	106.1
27	77.1	99.3	98.6	102.8	107.1
28	77.9	99.2	99.5	103.8	108.2
29	78.6	99.1	100.5	104.8	109.2
30	79.4	99.0	101.4	105.8	110.3

(ii) Weight for height charts given above is for all categories of personnel. This chart is prepared based on the HWH. 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, strength, and housing at the National level. In such cases the following criteria will have to be met.

- (a) Body Mass Index should be below 25.
- (b) Waist Hip ratio should be below 0.9 for males and 0.8 for females.
- (c) Waist Circumference should be less than 90 cm for males and 80 cm for females.
- (d) All biochemical metabolic parameters should be within normal limits.

Note: The height and weight for candidates below 17 years will be followed as per guidelines by 'Indian Academy of Pediatrics growth charts for height, weight and BMI for 05 Years to 18 Years old children' extended from time to time.

(iii) The minimum height required for male/female candidates for entry into the Army Flying is 157 cm or as decided by the respective recruiting agency. Candidates and candidates belonging to hills of North Eastern region of India, Garhwal and Kumaon, will be accepted with a minimum height of 152 cm.

Note: An allowance for growth of 8 cm will be made for both male and female candidates below 18 yrs of age at the time of examination. The minimum height requirement for the Flying Branch is 161 cm. Anthropometric standards like sitting height, leg length and thigh length are also required by the Flying Branch.

8. Following investigations will be carried out for all officer posts 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 RSI.

6. Certain standards may depending on age and type apply to candidates for vision as follows:

Parameter	Standard: (b) 2 minimum, NGS/Army), EIS and equivalent	Graduate & equivalent optometrist; CBSE, IMPL, OIA, LIO, NCY, HSC & institutions	Post graduate & equivalent optometrist; ENL, AEC, APS, BNCTA, AMK, ADC, M. Optometrist
Unorrected visual acuity distance	0.36 & 0.36	0.36 & 0.36	0.36 & 0.36
BCVA	0.46 & 0.46	0.46 & 0.46	0.46 & 0.46
Myopia	≤ -2.5 D SpH (including max. refraction $\leq +2.0$ D Cyl)	≤ -3.0 D SpH (including max. refraction $\leq +2.0$ D Cyl)	≤ -3.0 D SpH (including max. refraction $\leq +2.0$ D Cyl)
Hypertropia	$\leq +1.5$ D SpH (including max. refraction $\leq +2.0$ D Cyl)	$\leq +1.5$ D SpH (including max. refraction $\leq +2.0$ D Cyl)	$\leq +1.5$ D SpH (including max. refraction $\leq +2.0$ D Cyl)
Low & equivalent surgery	Not permitted	Permitted*	Permitted*
Colour perception	CP-II	CP-I	CP-II

*LASIK or Equivalent laser-refractive procedure

- (i) Any candidate who has undergone any laser-refractive procedure will have a certificateoperative notes from the medical 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 "Only due to uncorrected Visual Acuity corrective procedure".

- (ii) In order to be made fit, the following criteria will have to be met:

- (a) Age: more than 20 yrs at the time of surgery
- (b) Minimum 12 months post LASIK.
- (c) Corneal central thickness equal to or more than 450 μ .
- (d) Axial length by ELO: Master equal to or less than 26 mm

- (iv) Restricted infiltration of less than or equal to - 1.0 DPD cylinder, operable acceptable in the category applied for)
- (v) Normal heart rate
- (vi) Corneal topography and cornea markers can also be included as add criteria

Candidates who have undergone medical intervention are permanently unfit

- 11. Form is issued for medical board proceedings in AFMSF-2A.
- 12. Provision 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 fit the intended persons 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 candidate can request for 'Appeal Medical Board' (AMB). Detailed procedure for AMB will be provided by Provision SSB.
- 13. Miscellaneous aspects:
 - (i) Clinical methods of examination are laid down by CFO DK/AFMS.
 - (ii) Female candidates will be examined by female medical officers and specialists. In case of non availability they will be examined by Medical Officers in the presence of female student.
 - (iii) 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 10 year of open/laparoscopic surgeries for hernia and 12 weeks of laparoscopic abdominal surgery for cholecytectomy. 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, haemorrhage, fistula and excessive size of any joint, irrespective of duration of surgery.

Annexure B

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

PROCEDURE ON CONDUCT OF MEDICAL BOARDS

- 1. A candidate recommended by the Service Selection Board (SSB) will undergo a medical examination (Special Medical Board) by a Board of Service Medical Officers. Only those

candidate, who are declared fit by the Medical Board, will be admitted to the Academy. However, the President of the Medical Board will evaluate the candidates declared unfit of their results and the procedure for an Appeal Medical Board (AMBB) to be completed in a Contract Hospital or equivalent within 12 days, or Special Medical Board.

2. Candidate 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 AMBB will inform about the procedure of challenging the findings of AMBB. The candidate will also be informed that sanction for holding of Review Medical Board (RMB) will be granted at the discretion of DGM/AFS 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 in DGM/AFS, Integrated Headquarters Ministry of Defence (Navy), Auro Bhawan, Rajaji Marg, New Delhi – 110011 and a copy of the same is handed over to the President of AMBB. On DGM/AFS will indicate the date and place (Delhi and Pune only) where the candidate will appear for a RMB.

3. The following investigations will be carried out mandatory 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 H&E
- (c) X-Ray chest PA view
- (d) USG abdomen & pelvis
- (e) Liver Function Test
- (f) Renal Function Test
- (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 at home and abroad, 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 deformities. The candidate should not be overweight or obese.

3. Height

Height-Weight Chart - Navy

Height in Mm.	Up to 17 yrs		17 yrs + 1 day to 18 yrs		18 yrs + 1 day to 19 yrs		19 yrs + 1 day to 20 yrs		Above 20 yrs	
	Minim m Weight in Kg	Maxim m Weight in Kg								
147	37	45	40	47	40	48	41	50	40	52
148	37	46	41	48	41	49	41	50	41	53
149	38	47	42	49	42	50	42	51	42	53
150	38	47	42	49	42	50	42	52	42	54
151	39	48	43	50	43	51	43	52	43	54
152	39	49	43	51	43	52	43	53	43	55
153	40	49	43	51	43	52	43	54	43	56
154	41	50	44	52	44	53	44	55	44	57
155	41	50	44	52	44	53	44	55	44	58
156	41	51	45	53	45	54	45	56	45	59
157	42	51	46	53	46	54	46	57	46	60
158	42	52	46	54	46	55	46	57	46	60
159	43	52	47	54	47	55	47	58	47	61
160	43	53	47	55	47	56	47	59	47	62
161	44	54	48	56	48	57	48	60	48	63
162	45	55	49	57	49	58	49	60	49	64
163	45	56	50	58	50	59	50	61	50	65
164	46	56	50	58	50	59	50	61	50	66
165	46	57	50	59	50	60	50	62	50	67
166	47	58	51	60	51	61	51	63	51	68
167	47	58	51	60	51	61	51	64	51	69
168	48	59	52	61	52	62	52	65	52	70
169	48	59	52	61	52	62	52	66	52	70
170	49	61	53	62	53	63	53	68	53	71
171	49	61	53	62	53	63	53	69	53	72
172	50	62	54	63	54	64	54	70	54	73
173	51	63	55	64	55	65	55	71	55	74
174	51	64	56	64	56	66	56	72	56	75
175	52	64	57	65	57	67	57	73	57	76
176	52	65	57	65	57	68	57	74	57	77

L77	55	66	58	66	56	69	58	72	58	75
L78	54	67	59	67	56	70	59	73	56	76
L79	54	67	59	67	56	70	59	74	56	77
L80	53	68	60	68	56	71	60	75	60	78
L81	56	69	61	69	61	72	61	75	61	79
L82	56	70	61	70	61	73	61	76	61	79
L83	57	70	62	70	62	74	62	77	62	80
L84	58	71	63	71	63	75	63	78	63	81
L85	58	72	63	72	63	75	63	79	63	82
L86	59	73	64	73	64	76	64	80	64	83
L87	59	73	65	73	65	77	65	80	65	84
L88	60	74	65	74	65	78	65	81	65	85
L89	61	75	66	75	66	79	66	82	66	86
L90	61	76	67	76	67	79	67	83	67	87
L91	62	77	67	77	67	80	67	84	67	88
L92	63	77	68	77	68	81	68	85	68	89
L93	63	78	69	78	68	82	69	86	69	90
L94	64	79	70	79	70	83	70	87	70	90
L95	65	80	70	80	70	84	70	87	70	91

Notes for Male Candidates:-

- (i) 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.
- (ii) 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-
 - (a) Body Mass Index should not be more than 25.
 - (b) Waist : hip Ratio less than 0.9.
 - (c) All biochemical parameters such as blood sugar Fasting and Post Prandial, blood tests, cholesterol, HbA1C%, etc. are within normal limits.
- (iii) The fitness can only be given by a Medical Specialist.

- (ii) The minimum acceptable height is 171 cms. However, relaxation in height is permissible to candidates holding domicile of areas as mentioned below and talented sports merit candidates.

Sr No.	Category	Minimum Height for Male Candidates
(i)	Trishuls from Ladakh Region	159 Cms
(ii)	Andaman & Nicobar, Lakshadweep and Minicoy Islands	155 Cms
(iii)	Gorkhas, Nepali, Assamese, Garhwal, Kumaon and Uttarakhand	152 Cms
(iv)	Biharis, Sikhs & North East Region	152 Cms
(v)	Other talented sports candidates	155 Cms

Notes for Female Candidates:

- (a) The maximum and minimum weight for height will be standard for all categories of personnel. Candidates with weight below the minimum specified will not be accepted.
- (b) 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 0.8 for females
 - (iii) All biochemical parameters such as blood sugar (fasting and Post Prandial), blood sugar, creatinine, cholesterol, HbA1C%, etc are within normal limits.
- (c) Fitness can only be given by a Medical Specialist.
- (d) The minimum acceptable height for female Candidates is 152 cms. However, relaxation in height is permissible to candidates holding domicile of areas as mentioned below:

Sr No.	Category	Minimum Height for Female Candidates
(i)	Trishuls from Ladakh Region	150 Cm
(ii)	Andaman and Nicobar, Lakshadweep and Minicoy Islands	150 Cm
(iii)	Gorkhas, Nepali, Assamese, Garhwal, Kumaon and Uttarakhand	147 Cm
(iv)	Biharis, Sikhs & North East Region	147 Cm

- (e) The above relaxation in height will not be applicable to candidate seeking entry as officers into the Navy in Pilot/Observer specializations of the following branches.

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

- (a) The candidate is sufficiently intelligent, although the responsibility on this point rests with the Examining Officer. The Medical Officer will bring to the Examining Officer's notice any deficiency he/she may observe during the examination.
- (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. i.e. the eyes are bright, clear and with no obvious opacity 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 heart, lung and liver are sound.
- (g) Limbs of the candidates are well formed and fully developed.
- (h) There is no evidence of leprosy of any degree of form.
- (i) There is free and perfect action of all the joints.
- (j) Feet and toes are well formed.
- (l) Absence of any congenital malformation or defects.
- (m) Earlic does not bear traces of previous acute or chronic disease pointing to an important constitutional.
- (n) Presence of sufficient number of sound teeth for efficient mastication.
- (o) Absence of any disease of the Gastro-Intestinal tract.

The candidates very often do not give family history of disease because of ignorance. At times deliberate attempt is made for concealment of disease for fear of rejection. In all these cases Recruitign Medical Officer should state in concerned Part A of AFMTR-2A, if there is any relevant history of fits, Epilepsy, Typhoid or Tuberculosis. It is, however, essential to make a thorough clinical examination of candidates for any signs of organic disease/physical deficiency. Recruitign Medical Officer should either reject the candidate or endorse the disease in respective column, if it is of acceptable nature.

7. Major defects for rejection are as under:-

- (a) Weak constitution, imperfect development, congenital malformation, muscular wasting.

Note:- Muscular wasting is to be judged entirely by its effect on function.

(b) Malformation of the head involving deformity from fracture or depression of the bones of the skull.

(c) **Assessment of Scoliosis:** Idiopathic Scoliosis up to 10 degrees for Lateral Spine and 15 degrees of Thoracic 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 thoracic spine.
- (iv) There is no neurological deficit.
- (v) No congenital anomaly of the spine.
- (vi) There is absence of syndromic features.
- (vii) IUGR is normal.
- (viii) No deformity exists on full flexion of the spine.
- (ix) No restriction of range of movements.
- (x) No obvious defect causing structural abnormality.

(d) Skeletal deformity either bony/soft or acquired and disease or impairment of function of bones or joints.

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

(e) Asymmetry of torso posture, abnormality of locomotion including amputation.

(f) Deformity of hand and toes.

(g) **Hypertenable Finger Joint:** All candidates shall be thoroughly examined for hyper-extensible finger joints. Any extension of fingers bending backwards beyond 90 degrees shall be considered finger-hyperextensible and considered unfit. Other joints like knee, elbow, spine and hand shall also be examined carefully for features of finger-hyperextensibility. Although the individual may not show features of finger-hyperextensibility in other joints, isolated presentation of finger extensibility of finger joints shall be considered unfit because of the various activities that may mandatory later if such individuals are subjected to intensive physical training as mentioned above.

(h) **Mallet Finger:** Loss of extension mechanism at the distal inter-phalangeal joint leads to Mallet finger. Chronic mallet deformity can lead to secondary changes at the PIP and MCP joint which can result in compromised hand function. Normal range of movement at DIP joints is 0-90 degrees and PIP joint is 100 degrees in both flexion and extension. In Mallet finger, candidate is unable to extend straight distal phalanx of fingers completely.

(i) Candidates with mild conditions i.e., less than 10 degrees of extension lag without any evidence of trauma, pain/no symptoms and no functional deficit should be declared fit.

- (iii) Candidates with fixed deformity of fingers will be declared unfit.
- (iv) **Pseudoclavicle:** 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 narrowing or clinical obstruction.
- (v) **Scapulo-thoracic:** 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 web space is satisfactory.
- (vi) **Complex Fracture:** unfit
- (vii) **Fracture:** 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 treated disease.
- (viii) **Hypertrophic Osteoarthritis:** Will be considered fit in the absence of any other metabolic abnormality.
- (ix) **Healed Fracture:**
- (i) 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.
 - (ii) All extra-articular with post-operative implant scars shall be considered unfit and will be considered fit fitness after removal of 12 weeks of implant removed.
 - (iii) Nine (9) months will be the minimum duration for considering evaluation following extra-articular repairs of all long bones (both upper and lower limbs) post injury which have been managed conservatively. Individual will be considered fit if there is:-
 - (a) No evidence of mal-alignment/angulation.
 - (b) No scars/scar tissue.
 - (c) No soft tissue loss.
 - (d) No functional deficit.
 - (e) No evidence of osteomyelitis/synovitis formation.
- (x) **Cubitus Recurvatum:** - 10 degrees is limb
- (xi) **Cubitus Valgus:**
- (xii) **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 angle 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 inconsistency 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 humerus, distal 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 the distal axis of the arm and forearm. The axis of the arm is defined by the lateral border of the cranial surface of the scapula 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.

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

- (a) History of trauma
- (b) Swelling around elbow
- (c) Asymmetry of angles
- (d) Distal quadriceps deficit
- (e) Restricted range of motion
- (f) If directed necessary by orthopaedic surgeon

(ii) **Hypertension at Elbow Joint**: individuals can have naturally hypertensive elbow. This condition is not a medical problem, but can be a cause of fracture or chronic pain especially considering the more and more military population is involved in. Also, the inability to return the elbow to within 10 degrees of the neutral position is a requirement in the activities of daily living.

(i) Measurement validity: Measuring a Goniometer:

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

6. Eye:

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

Visual standards for NHT/ NA entry are as follows -

Criteria	NHSA/NA
Uncorrected Vision	6/12 - 6/15
Corrected Vision	6/6 - 6/6
Lenses of Myopia	-1.0 D SpH
Lenses of Hypermetropia	+1.0 D SpH
Antagonistic (within limits of myopia and hypermetropia)	± 1.0 D/C cyl
Binocular Vision	18
Colour Perception	CP Pass*

* CP defect will be assessed by only Ishihara test during NHSA. However, Anemoscope to be used during ANB/RMHL for confirmation, as applicable.

2. Kerato Refractive Surgery: Keratometry will be performed for candidates at NHSA for assessing uncorrected refractive corrective procedures like PRK/LASIK/SMILE, etc. Values for the same will be endorsed in SHM. Candidates who have undergone any Refractive Surgery (PRK/LASIK/SMILE) can be considered fit in all branches (except submarine, diving and MARCO) subject to the following conditions:

- (i) Surgery should not have been carried out before 21 yrs of age;
- (ii) Uncomplicated surgery at least 12 months before examination (Certificate mentioning the type of refractive surgery, date of surgery and pre-operative refractive error from uncorrected eye centre is to be produced by the candidate at the time of recruitment medical examination);
- (iii) **Post LASIK Standards:** Candidate will be considered fit if Axial Length by KL Master is equal to or less than 26 mm by OSL Master or A Scan and Central Corneal Thickness by Pachymeter equal to or more than 450 microns;
- (iv) Residual refraction less than or equal to ± 0.5 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 0;
- (v) Pre-operative refraction error not more than ~ 0.01 ;
- (vi) Normal visual examination.

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

4. Prosthetic: Candidate will be considered fit post-operative provided there is no encroachment one year after surgery, visual axis is clear with normal visual fields and upper eyelid < 42 mm below the superior fornix. Candidates, who have not

adverse surgery for the condition, would be considered fit if they meet any of the following criteria:-

- (i) Mild ptosis
- (ii) Clear visual axis
- (iii) Normal visual field
- (iv) No sign of disease degeneration/ head tilt

5. **Entropia** 1/10

6. **Anisocoria**: If the difference between the pupils is <0.5mm, candidate will be considered unfit.

7. **Heterochromia Iridum** 1/10

8. **Sphincter Tears**: Can be considered fit if no difference between pupils is >0.5mm, pupillary reflexes are brisk with no residual pathology in cornea, lens or retina.

9. **Exophthalmos** 1/10

10. **Lenticular Opacities**: Any lenticular opacity causing visual deterioration, or in to the visual axis or is present in an area of >1 mm around the pupil, which may cause glare phenomenon, should be considered unfit. The propensity of the opacity not to improve in size or number should also be a consideration when deciding fitness. Small stationary lenticular opacities in the periphery like congenital blue dot cannot, not affecting the visual axis/ visual field may be considered by specialist (visual acuity less than 30 in number and central area of 14 mm to be clear).

11. **Optic Nerve Disease** 1/10

12. **High Optic Disc Stasis**: Candidate will be declared unfit if any of the following conditions persist:-

- (i) Inter eye symmetry or cup disc ratio is >0.2 .
- (ii) Retinal Nerve Fiber Layer defect seen by ENFL analysis on OCT.
- (iii) Visual field defect by Visual Field Analysis.

13. **Keratoconus** 1/10

14. **Lenticle**

- (i) The following lenticle deformations will render a candidate unfit:-
 - (a) Single circumferential lattice extending more than ten clock hours in either or both eyes.

- (ii) Two circumferential latus such that one clock hour is more in either or both eyes.
- (iii) Radial latus.
- (iv) Any latus with amorphic hole/ flap test (irreversible)
- (v) Latus degeneration greater than equal.
- (vi) Candidates with latus degeneration will be considered fit under the following conditions:-
- (i) Single circumferential latus without holes less than two clock hours in either or both eyes.
- (ii) Two circumferential latus without holes such being less than one clock hour in either or both eyes.
- (iii) Post Laser ablation single circumferential latus, without holes/ flap test less than two clock hours exist in either or both eyes.
- (iv) Post Laser ablation two circumferential latus, without holes/ flap test, each being less than one clock hour exist in either or both eyes.

9. *Eye, Nose and Throat*

- (i) **Ear:** History or recurrent ear ache, tinnitus or vertigo, impairment of hearing, disease of the external ear including stricture, occlusion or neoplasm which prevent a thorough examination of the drum, unhealed perforation of the tympanic membrane, and discharge or signs of acute or chronic suppurative otitis media, evidence of radical or modified radical mastoid operation.

10. *ENT*

1. A candidate should be able to hear frontal whisper at a distance of 6.0 m with each ear separately with back to the examiner.
2. **Otitis Media:** Current Otitis Media of any type will result rejection. Evidence of healed chronic otitis media in the form of tympanostomy/ stapedius tympanic membrane affecting less than 30% of Pure Tone Test of tympanic membrane will be accepted by ENT Specialist and will be acceptable if Pure Tone Audiometry (PTA) and Tympanometry are normal. All cases of Tympanoplasty and Myringoplasty/ Myringotomy for chronic Otitis Media will entail permanent rejection.

- (i) The drug conditions would render a candidate unfit:-
- (ii) Nasal perforation

(iii) **Residual hearing loss:** an free field hearing aid or PIA.

(iv) Any other type of tympanoplasty (other than Type I) (hypotymoplasty or middle ear surgery including mastoidectomy, mastoplasty, and well down mandibular, atresia, skin advancement, etc.)

(v) Any implanted hearing device (e.g. cochlear implant, bone conduction implant, middle ear implant etc.)

(b) Bone Growth of External Auditory Canal: Any candidate with clinically evident bony growth of external auditory canal like exostosis, external fibrous dysplasia etc. will be declared unfit. Assessment of rejected cases will be done after maximum period of 6 weeks. Post-surgery histopathology report and H&E 1 temporal bone will be mandatory. If the histopathological report is suggestive of a neoplasm or H&E 1 temporal bone is suggestive of partial removal or deep erosion it would entail rejection.

(vi) **Nose:** Disease of the bone or cartilage 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 0.1 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.

(i) **Nasal Polypsis:** It is also known as Chronic Rhinosinusitis with polyposis (CRSPNP). Nasal polypsis is mainly 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 polypsis or examination of with history of having undergone surgery for nasal polyposis will be rejected.

(ii) **Throat:** Disease of throat, palate, tongue, tonsils, gape, and disease or injury affecting the normal function of other masticatory joints.

Note:- Simple hypertrophy of the uvula without associated history of atrophy of tonsillitis is acceptable.

(iii) **Disease of the larynx and impairment of speech:** Voice should be normal. Candidates with pronounced stridor will not be accepted.

(iv) **Dental Condition:** It should be ensured that a sufficient number of natural and used teeth are present for efficient mastication.

(v) 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

teeth, 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 upper 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 opposition must be present in each jaw:-
- (i) Any 4 of the 8 anterior.
 - (ii) Any 4 of the 10 posterior.
- All these teeth must be sound, removable.
- (a) Candidates suffering from severe pyrexia will be rejected. Where the state of pyrexia 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.
 - (b) Medical certificates are not to be included while counting the dental points.

11. Neck:

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

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

- (b) Disease of the thyroid gland.
- (c) **Chest:** The following are criteria for rejection:-
- (a) Deformity of chest, congenital or acquired.
 - (b) Expansion less than 2 cms.
 - (c) Significant bilateral/ unilateral gynaecomastia in males. Can be evaluated for fitness 12 weeks post-op. Candidates to be considered fit after 12 weeks if post-operative period fit.
 - (d) There is a well healed surgical wound with no residual disease.
 - (e) No post-operative complication.
 - (f) Surgical scar should be sufficiently matured and unlikely to cause any problems during military training.

- (g) Normal general physical examination.
 - (h) Endurance workup is normal.
- 12. Skin and Sexually Transmitted Infection (STI)**
- (a) Skin disease unless temporary or trivial.
 - (b) Lesions which by their extent or position cause or are likely to cause disability or marked disfigurement.
 - (c) Hyperthyroid - Palmar, plantar or axillary.
 - (d) Congenital, active or latent sexually transmitted disease.

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

13. Respiratory System:

- (a) History of chronic cough or bronchial asthma.
- (b) Evidence of Pulmonary Tuberculosis.
- (c) Evidence of disease of bronchi, lungs or pleura 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.

14. Cardio-Vascular System:

- (a) Functional or organic disease of the heart or blood vessels, presence of murmur or clicks on auscultation.
- (b) Tachycardia (Pulse Rate persistently over 90/min at rest), bradycardia (Pulse Rate persistently below 40/min at rest), any abnormality of peripheral pulses.
- (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 (24h ABPM) to differentiate between orthostatic hypertension and persistent hypertension. Whatever result, candidates will be evaluated by a

Cardiologist or ANM. Those with normal 24h ABPM and without any target organ damage can be considered fit after evaluation by a cardiologist.

(i) **Electrocardiogram (ECG)**: Any STG abnormality detected at SSB will be a ground for rejection. Such candidates will be evaluated by a cardiologist during ANM 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 (posterior precordial 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. If echocardiography and stress tests (if indicated) are normal, the individual can be considered fit.

(ii) **Abdomen**

(a) Evidence of any disease of the gastro-intestinal tract, enlargement of liver, gall bladder or spleen, tenderness on abdominal palpation, evidence of painless ulcer or previous history of peptic ulcer surgery. All other 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) Hyperbilirubinaemia of any nature is unfit except for Unconjugated Hyperbilirubinaemia unless genetic studies confirm Gilbert's Syndrome as the aetiological factor meeting criteria published below:

- (i) Unconjugated hyperbilirubinaemia with Total Serum Bil ratio = Uniglob, serum transaminases, #TIBC and albumin.
- (ii) HBs Ag and Anti HCA should be negative.
- (iii) No abnormality on TIBC, Rosalocoxyle count, lactate dehydrogenase levels, GGT, VLDL and HDL electrophoresis.
- (iv) Normal Ultrasoundogram of the liver and Hb/HbC/VN.
- (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:-
 - (a) 24 weeks have elapsed since the operation for Anterior Abdominal Wall hernia. Documentary proof to this effect is to be produced by the candidate.
 - (b) General tone of the abdominal musculature is good.

- (a) There has been no recurrence of hernia or any complication connected with the operation.
- (ii) **Other Conditions:** Those who have been operated the below mentioned conditions may be declared fit provided:
- (a) Open Cholecystectomy: 24 weeks (In the absence of incisional Hernia)
 - (b) Laparoscopic Cholecystectomy: 18 weeks (Normal LFT, Normal Histopathology)
 - (c) Appendicectomy:
- (i) **Laparoscopic Appendicectomy** will be assessed for post op fitness after a minimum period of 12 weeks. Candidate will be considered fit if:
- (a) Wound site scars have healed well.
 - (b) Scar is supple.
 - (c) Histopathological report of acute appendicitis is available.
 - (d) USG confirmation of absence of post site incisional hernia.
- (ii) **Open Appendicectomy with muscle split approach** will be assessed for post op fitness after a minimum period 12 weeks. Candidate will be considered fit if:
- (a) Wound has healed well.
 - (b) Scar is supple and non tender.
 - (c) Histopathological report of acute appendicitis is available.
 - (d) USG confirmation of absence of surgical site incisional hernia.
- (iii) **Open Appendicectomy with muscle cut approach** will be assessed for post op fitness after a minimum period of 6 months. Candidate will be considered fit if:-
- (a) Wound has healed well.
 - (b) Scar is supple and non tender; appendicectomy is available.
 - (c) USG confirmation of absence of surgical site incisional hernia.
 - (d) Histopathological report of acute appendicitis is available.
- (iv) **Hernia**: 12 months, 12 weeks
- (v) **Hydrocoele or Varicocele**: 08 weeks post op with satisfactory function and recovery.

- (e) **Ductal cyst:** 18 weeks post-op with satisfactory treatment and absence of any symptom.
- (f) **Anomaly of Gall Bladder:** Will be considered 16 in the absence of any other abnormality of the biliary tract. MRCP will be done for all such cases.
11. **Gonad-Urinary System.**
- Any evidence of disease of genital organs.
 - 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.
 - Disease or malformation of the kidneys or ureters.
 - Insufficiency of urine and nocturnal enuresis.
 - Any abnormality on examination of urine including albuminuria or glycosuria.
 - The following are criteria for rejection:-
 - Renal Calculi: irrespective of size, number, obstructive or non-obstructive. History of renal calculi (history or radiological evidence) will render a candidate unfit.
 - Cystocele.
 - Bladder Diverticulum.
 - Simple Renal Cyst, > 1.5 Cm.
12. **Central Nervous System.**
- Organic disease of Central Nervous System.
 - Tumors.
 - Candidates with history of fits and recurrent attacks of headache/ migraine will not be accepted.
13. **Psychiatric Disorders:** History or evidence of mental disease or nervous instability in the candidate or his family.

14 Lab Investigation (Continued)

- (ii) **Polyglobulism**: Hemoglobin more than 16.5 g/dl. in males and more than 15 g/dl. in females will be considered as Polyglobulism and deemed unfit.
- (iii) **Leucocytosis**: Absolute neutrophil counts greater than 1000/mm³ or more than or equal to 10% of total WBC counts are to be deemed unfit.
- (iv) **Leukopenia**: Absolute neutrophil counts greater than or equal to 2000/mm³ are to be deemed unfit.
- 20. **Women Candidates**: They should not be pregnant and should also be free from gynaecological disorders such as primary or secondary Amenorrhoea, Hypomenorrhoea, Menorrhagia etc. All women candidates are to be subjected to ultra Sound investigation of the abdominal and pelvic regions for detecting any abnormalities of the internal organs.
- 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 form on entry.
 - (i) Knock Knees with a separation of less than 7 cm at the lateral malleoli.
 - (ii) Mild curvature of legs not affecting walking or running. Intercondylar distance should not be over 7 cm.
 - (iii) Mild scoliosis not affecting expansion.
 - (iv) Mild degree of varicose veins.
 - (v) Mild degree of varicose veins.

Note:- Reversal 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 or one to be made by their private medical advisor. The Government will accept no liability regarding the result of operation or any expenses incurred.

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

Annexure C

MEDICAL STANDARDS FOR NDA (AIR FORCE) (FLYING & GROUND DUTY BRANCHES)

GENERAL INSTRUCTIONS

1. In this section, standardised guidelines for the physical assessment of candidates for commissioning through NDA into flying and ground 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 profitably undergo the training and the subsequent service in varied domestic 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 areas in which the parameters for visual acuity, anthropometry and certain other physical standards are more stringent.

3. The medical standards set out pertain to medical entry medical standards. Examination of medical fitness during training will be assessed during the period medical examinations held at NDA/AFIA prior to commissioning. They are not absolute, in view of the wide 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 Haemoglobinopathy.
- (c) **Biochemistry:** Liver function test (LFT), Renal Function Test (RFT), Blood glucose estimates (Fasting and one hour after 75g anhydrous glucose/2.5g glucose monohydrate loading), Lipid profile.
- (d) **Urine:** Routine Examination (RE) and Microscopic Examination (ME).
- (e) **HCG**
- (f) **Radiology:**
 - (i) Radiograph Chest PA view in all candidates.
 - (ii) Radiograph Lumbar sacral Spine: AP and Lateral views in all candidates.
 - (iii) In addition to the above radiographs, Cervical spine = AP and Lateral views, Thorax: AP and Lateral views will be carried out in all candidates being assessed for flying duties.
 - (iv) LNR: Abdomen and Pelvis.
 - (v) Any other additional investigation deemed necessary will be ordered during the clinical 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 medical effects of old bursitis, 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 individually assessed:
- (a) **Skin Defects.** Cases of soft tissue loss or skin are unfit. Any residual deformity of skin or contraction of a tendon will be cause for rejection.
 - (b) **Nerve Injuries.** Injuries involving the trunks of the large nerves, resulting in loss of function, or neuroma formation which causes pain, significant tingling, reduced availability for employment in flying duties.
 - (c) **Keloids.** The presence of large or multiple keloids will be cause for rejection.
 - (d) **Surgical Scars.** Most well-healed scars from e.g. as scarring from any superficial surgery do not, per se, reduce unsuitability for employment. Extensive scarring of a limb or torso that may cause functional limitation or negatively appearance should be considered unfit.
 - (e) **Birth Marks.** Abnormal pigmentation in the form of hypo or hyper-pigmentation is not acceptable. Localized, congenital moles/ naevi, however, is acceptable provided its size is <10 mm. Congenital multiple small or vascular naevi that interfere with function or are exposed to constant irritation are not acceptable.
 - (f) **Subcutaneous Swelling.** Lesions will be considered fit unless the lipoma is causing significant disfigurement/ functional impairment due to the size/ location. Neurofibromas, 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 ribs without any musculoskeletal compromise will be accepted. Thorough clinical examination to rule out musculoskeletal 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 deviation 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 removal, resection, amputation or partial/ total excision of any organ(s), 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 Principles

T. Chest Shape and Circumference: the shape of the chest is as important as its actual measurement. The chest should be well proportioned and well developed. Any chest deformity likely to interfere with physical exertions 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 recommended chest circumference for Candidates is 77 cm. The chest expansion should be at least 10 cm for all 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 1 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 6.7 cm (155 cm for male and 150 cm for female). For Norther and individual belonging to North-Eastern regions of India and hilly regions of Uttarakhand, the minimum acceptable height will be 6 cm less (152 cm for male and 147 cm for female).

Note 2: Candidates of North East and hilly areas ethnicity includes Gorakhpur, Karanagar, Coimbatore, Assam 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) Pilot, Flight Test Engineers (FTE) and WSOs of Su-30 MKI - 162 cm.
- (ii) Officers and aviators who apply for uncrew dates, other than F (P), FTE dates and WSOs of Su-30 MKI - 157 cm.

9. Height, Sitting Height, Leg Length and Thigh Length for Male Candidates;

(a) Minimum height for Flying branch will be 162.5 cm. Acceptable measurements of leg length, thigh length and sitting height for such aviators will be as under:-

(i)	Sitting height	Minimum Maximum	81.5 cm 86.0 cm
(ii)	Leg Length	Minimum Maximum	99.0 cm 120.0 cm
(iii)	Thigh Length	Minimum	66.0 cm

11. Body Weight Parameters

(a) The acceptable weight range for candidates is given at Appendix A (Male candidates) and Appendix B (Female candidates) to this chapter. 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 25 yrs	Age at last birthday: 25 or 25 yrs	Age at last birthday: Above 25 yrs
152	33	33	35	38
153	34	34	36	39
154	36	33	37	39
155	37	35	38	40
156	38	36	39	41
157	39	37	39	42
158	40	37	40	42
159	41	38	41	43
160	42	39	41	44
161	43	40	42	45
162	45	40	42	46
163	45	42	44	46
164	46	42	45	47
165	47	43	45	48
166	47	43	46	49
167	47	44	47	50
168	48	45	48	51
169	49	46	49	51
170	49	46	49	52
171	50	47	50	52
172	50	48	51	54
173	51	49	52	55
174	51	50	53	56
175	52	50	54	57
176	53	51	54	57
177	53	52	55	58
178	54	53	56	59
179	54	54	57	60
180	55	55	58	61
181	56	55	59	62
182	56	56	59	62
183	57	57	60	64

184	58	78	91	101
185	58	79	92	102
186	59	80	93	103
187	60	80	94	104
188	61	81	95	105
189	61	82	96	106
190	61	83	97	107
191	62	84	98	108
192	63	85	99	109
193	63	86	100	110
194	64	87	101	111
195	65	87	101	111
196	65	88	102	112
197	66	89	103	113
198	67	90	104	114
199	67	91	105	115
200	68	92	106	116

Appendix B
(Refer page 8 & 10)

WEIGHT FOR HEIGHT CHART- FEMALES (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
147	37	45	48	51
148	37	46	49	51
149	37	47	51	52
150	37	47	50	53
151	37	48	50	54
152	37	49	51	54
153	37	49	51	55
154	38	50	52	56
155	38	50	53	56
156	39	51	54	57
157	39	52	54	58
158	40	52	55	58
159	40	53	56	59
160	41	53	56	60
161	41	54	57	61
162	42	55	58	62
163	43	56	59	63
164	43	56	59	63
165	44	57	60	64
166	44	58	61	65
167	45	59	61	66

168	45	59	62	90
169	46	60	63	97
170	46	61	63	98
171	47	61	64	99
172	47	62	67	70
173	48	63	69	70
174	48	64	67	71
175	49	64	67	72
176	50	65	68	73
177	51	66	69	74
178	51	67	70	74
179	51	67	70	75
180	52	68	71	76
181	52	69	72	77
182	53	70	72	78
183	54	70	74	79
184	54	71	74	80
185	55	72	75	80
186	55	73	76	81
187	56	73	77	82
188	57	74	78	83
189	57	75	79	84
190	58	76	79	85
191	58	77	80	86
192	59	77	81	87
193	60	78	82	88
194	61	79	83	89

CARDIOVASCULAR SYSTEM

11. **Pulse**: Persistent sinus tachycardia (>100 bpm) as well as persistent sinus bradycardia (<60 bpm) are soft. 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 usually organic. Short systolic murmur of cardiac 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 abnormalities detected at SNTU (Kacchmaruk Medical Foundation) will be a ground for rejection. Simple ECG abnormalities like incomplete RBBB, T wave inversion in inferior leads, T inversion in V1 to V3 (persistent juvenile pattern), LBBB by vintage 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 at this point 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 radiograph 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. **Bronchiectasis:** Any evidence of pluviot 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. **Breathlessness:** History of repeated attacks of喘息/whistling/breathlessness 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/whistling/ wheezing attacks will be a cause for rejection.
21. **Radiographs of the Chest:** Definite radiological evidence of disease of the lungs, mediastinum and pleura 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 malnutrition:** Presence of any sign of liver cell failure (e.g. loss of hair, periorbital oedema, spider naevi, gynaecomastia, testicular atrophy, flapping tremors etc) and any evidence of malnutrition (quid-like stool and skin changes, angular cheilosis, periorbital cellulitis) will be a cause for rejection.
24. **Gastro-Duodenal Disease:** Any past surgical procedure involving partial or total loss of stomach (other than normal organ/pall 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; HAV and HBV status are both negative and liver functions are within normal limits. History of recurrent jaundice and hyperconcentration of any jaundice is unfit.

16. Disease of the Spine: Candidates who have undergone partial/ total spine surgery are unfit; irrespective of the cause for operation.

17. Hernia: Any abdominal wall hernia is unfit. A candidate with a well-healed surgical scar after 24 weeks of either open or laparoscopic repair, is considered fit provided there is no evidence of recurrence and the abdominal wall musculature is good.

18. Abdominal Surgery: A candidate with well-healed scar post conventional abdominal surgery except appendicectomy through right dia-phragmatic incision, refer par 12.9 (f) 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.

19. Assessable Conditions: The examinee should do a digital rectal examination and rule out haemorrhoids, anal fissure, anal skin tags, fissure, sinus, fistula, perirectal mural mass or polyps.

(a) Fx

- (i) After anal surgery for polyps, haemorrhoids, fissure, fistula, ulcer or phlebotomy veins, provided there is no residual recurrent disease.
 - (aa) Anal Fissure, Haemorrhoids, After 12 weeks of surgery.
 - (ab) Fistulae Now, After 12 weeks of surgery.

(b) Def:

- (i) Rectal prolapse even after surgical correction.
- (ii) Active anal fissure & external Skin tags.
- (iii) Haemorrhoids (external or internal).
- (iv) Anal Fissure.
- (v) Anal or rectal polyps.
- (vi) Anal stricture.
- (vii) Faecal incontinence.

20. Ultrasonography of Abdomen

(a) Liver

Fx

- (i) Normal echo-maturity of the liver: CHI, RHR, portal and hepatic veins with flow spans not exceeding 10 cm in the mid-clavicular line.
- (ii) Solitary simple cyst (thin wall, anechoic area 2.5 cm diameter provided that the LFT is normal and biliary serology is negative).
- (iii) Hepatic calcifications to be considered fit if solitary and less than 1 cm with no evidence of active disease like tuberculous, sarcoidosis, hydatid disease or liver abscess based on relevant clinical examinations and appropriate investigations.

D&B

- (i) Hepatomegaly more than 15 cm in mid-clavicular line
- (ii) Fatty liver.
- (iii) Grade 1 Fatty liver with abnormal LFT.
- (iv) Grade 2 and 3 Fatty Liver.
- (v) Solitary cyst > 2.5 cm.
- (vi) Solitary cyst of any size with thick walls, septations, papillary projections, calcifications and debris.
- (vii) Multiple hepatic calcifications or cluster greater than 6.0 cm.
- (viii) Multiple hepatic cysts of any size.
- (ix) Any haemangioma irrespective of the size and location.
- (x) Portal vein thrombosis.
- (xi) Evidence of portal hypertension (portal vein >1 mm, collateral vessels).

31 Cell Bladder

- (a) (i) Normal ultrasound of the gall bladder.
- (ii) **Pain, Jaundice, Cholecytectomy:** 10 channel LFT, serum biochemistry
- (iii) **Pain, Operations, Cholectostomy:** 24 weeks, perceived LFT and histopathology are within normal limits and in the absence of biliaryuria is confirmed on LSGA Abdomen.
- (b) (i) Cholelithiasis or biliary sludge.
- (ii) Choleductolithiasis.
- (iii) Polyp of any size and number.
- (iv) Cholangiolocyst.
- (v) Gall bladder mass.

- (v) Gall bladder wall thickness >10 mm
- (vi) Septate gall bladder.
- (vii) Peri-pancreatic gall bladder or repeat USG.
- (viii) Incomplete Cholecystectomy.

(ix) **Non-visionized 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) or the absence of any other abnormality of the biliary tract.

32 Spleen

- (a) Defects
 - (i) Spleen more than 13 cm in longitudinal axis (or if clinically palpable).
 - (ii) Any space occupying lesion in the spleen.
 - (iii) Asplenics.
- (iv) Candidates who have undergone partial/ total splenectomy are unfit irrespective of the cause of operation.

33 Thrombocytopenia

- (a) Defects
 - (i) Spleen more than 13 cm in longitudinal axis (or if clinically palpable).
 - (ii) Any space occupying lesion in the spleen.
 - (iii) Asplenics.
- (iv) Candidates who have undergone partial/total splenectomy are unfit irrespective of the cause of operation.

34 Endocrine Glands

- (a) Defects
 - (i) Anectasia.
 - (ii) Solitary macromas or ectopic adrenal lesions >1 cm. Non-glucocorticoid 1N <1 cm and normal in architecture may be considered fit.

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

25. Major Abdominal Vaccinations (Aorta/ IVC). Any structural abnormality, focal scarring, ulceration and calcification will be considered as such.

26. Appendicectomy:

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

- (i) Post-operative site scars have healed well.
- (ii) Scar is supple.
- (iii) Histopathological report of acute appendicitis is available.
- (iv) USG confirmation of absence of post op incisional hernia.

(b) **Open Appendectomy** with muscle split approach will be assessed for Post op fitness after a minimum period of **12 weeks**. Candidate will be considered fit if:-

- (i) Normal scar 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 (CDT) Orchiectomy:

(a) Test:

- (i) If the testis cannot be palpated (undescended 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) Bi:

- (i) Operatively corrected CDT 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, function and location.
- 38. Agnathia/Tum.**
- (i) **Defn** Unilateral agnathia/tum.
 - (ii) **Fix** Unilateral agnathia/tum for benign cause, provided other testis is normal in size, function and location.
- 39. Variocole**
- (i) **Units** - All grades of current varicose.
 - (ii) **Fix** - Post-operative cases of varicose with no residual varicosities and no post-operative complication or testicular atrophy after 10 weeks of surgery.
- 40. Hydrocole**
- (i) **Units** - Current hydrocole in any site.
 - (ii) **Fix** - Operated cases of hydrocole may be made fit after 10 weeks of surgery, if there are no post-op complications and testis has tested well.
- 41. Epididymal Cyst/ Mass, Spermatocyst**
- (i) **Units** - Current presence of cyst/ mass.
 - (ii) **Fix** - Post-operative cases, where swab has tested cyst, fluid is no incisive and only when biopsy on histopathology report.
- 42. Epididymitis/ Orchitis**
- (i) **Units** - Presence of current orchitis or epididymitis/ tuberculosis.
 - (ii) **Fix** - After treatment, provided the condition has resolved completely.
- 43. Epispadias/ Hypospadias**
- (i) **Units** - All anorrect, except glanular variety of hypospadias and epispadias, which is acceptable.
 - (ii) **Fix** - Post-operative cases at least 10 weeks after successful surgery, provided recovery is complete and there are no complications.

44. Psoriasis, Any separation will make the candidate unfit.

45. Phakos:

(i) **Lentil** – Current phakos, if large enough to interfere with local hygiene and cleaning and/or associated with idiopathic Axenous Chalazia.

(ii) **Itis** – Operated cases will be considered fit after 04 weeks of surgery, provided wound is fully healed and no post-*op* complications are seen.

46. Mental Status

(i) **Ladle** – Current disease, if small enough to interfere with working.

(ii) **Ugi** – Mild disease not interfering with working and post-operative cases after a period of 06 weeks of surgery with adequately healed wound and no post-*op* complications.

47. Stricture Uretra, Central Fistula: Any history of / current case or post-*op* case are unfit.

48. Sex Transmissible Surgery/Infective condition: Unfit.

49. Septostomy: All cases, irrespective of the type of surgery (Simple radial/ deep/ partial RFS/ transposition) are unfit.

50. Renal Transplant Recipients: Unfit.

51. Unclad Cyst: 08 Weeks (To be declared fit in the absence of any symptom)

52. Cases of Bladder diverticulum will be declared as unfit.

53. Other Examinations

(i) **Promiscuity:** Promiscuity will be a cause for rejection, unless it proves to be absolute.

(ii) **Glycosuria:** When glycosuria is detected, a blood sugar examination (fasting and after 2g glucose) and glycated haemoglobin will be carried out, and fitness declared as per results. Renal glycosuria is not a cause for rejection.

(iii) **Urinary Infection:** When the candidate has history or evidence of urinary infection it will entail full renal investigation. Persistent evidence of urinary infection will result rejection.

(iv) **Hæmaturia:** Conditions with history of haematuria will be subjected to full renal investigation.

54. Glaucoma/epicrani.

(a) **Glauco:** In this condition there is a high rate of mortality in the acute phase, particularly in children. A candidate who has made a complete recovery and has no permanent may be assessed fit, after a minimum period of one year after full recovery.

(b) **Chromo:** Candidates with chronic glaucomalophitis will be rejected.

55. Renal Calculi: irrespective of size, number, obstructive or non-obstructive, history of renal calculi (theory or radiological evidence) will render a candidate unfit.

56. Sexual Transmitted Diseases and Human Immunodeficiency Virus (HIV): Seropositive HIV status and/or evidence of AIDS will render rejection.

57. Ultrasonography of the Abdomen - Urinogenital System

58. Kidneys, uterus and urinary bladder

(a) Uteri

- (i) Congenital structural abnormalities of kidneys or urinary tract:
 - (a) Unilateral renal agenesis,
 - (b) Unilateral or bilateral hydronephrosis/contracted kidney of size less than 2% cm.

(a) Malformation of kidney.

(a) Horseshoe kidney

(a) Pelvi-ureteric junction.

(a) Crossed fused ectopic kidney.

(b) Simple unilateral eye of size less than 1.5 cm size in one kidney

(b) Complex cyst poly cystic disease: multiple or bilateral cysts.

(b) Renal/urinary: renal mass.

(b) Hydrocephalus or hydroencephalus.

(b) Cerebral - Renal/ Uterine/ Vaginal.

(b) Cystocele.

- (ii) Solitary, undemanding, simple eyelid cyst <1.5 cm preceded the eye is peripherally located, round/ oval, with thin connective wall and no localization, with posterior attachment; no lobes, no septa and no solid component.

ENDOCRINE SYSTEM

51. Any history suggestive of endocrine disorder will be a cause for rejection.
52. Clinical examination: Any clinical evidence of endocrine disease will be unfit.
53. All cases of thyroid swelling are unfit. Fitness of each case will be decided during appeal medical board after evaluation with appropriate investigations.
54. Candidates diagnosed to have Diabetes Mellitus will be rejected. A candidate with a family history of Diabetes Mellitus will be subjected to blood sugar testing and after two hours of 75 g oral glucose tolerance test and HbA1c evaluation, which will be recorded.

DERMATOLOGICAL SYSTEM

55. **External History and Examination:** Candidates who give history of sexual exposure to a Commercial Sex Worker (CSW) and have evidence of herded penile sores in the form of a scar may be declared permanently unfit, even in absence of an overt STB, as these candidates are likely "reservoirs" with similar indulgent promiscuous behavior.
56. **Assessment of Diseases of the Skin:** Acute non-exanthematos and non-communicable diseases, which evidently has a temporary course, would 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.
57. Certain skin conditions are apt to become active and exacerbating 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:
58. **Pelioepithelial Hyperplasia:** Some amount of Pelioepithelial Hyperplasia is physiological, considering the situation that humans face during medical examination. However, candidates with significant Pelioepithelial Hyperplasia should be considered unfit.
59. **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) as involving the back should be considered unfit.
60. **Pelioepithelial Keratoderma:** Very degree of pelioepithelial keratoderma manifesting with hyperkeratotic and fissured skin over the palms, soles and back should be considered unfit.

69. **Inflammatory ulcerogangrenous** involving the upper and lower teeth, with evident dry, crusty, fissured skin should be considered unfit. Mild ulcers (dry skin) could be considered fit.
70. Candidates having any ulcer 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 naevi.
73. Single or multiple naevi/ Callosities will be considered fit, three months after successful treatment and no recurrence. However, candidates with multiple warty naevi/callosities on palms and soles or diffuse palmoplantar tissue naevi, Sogo callosities on pressure areas of palms and soles should be rejected.
74. **Pityriasis** 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. Hollodius or eycous furfur form 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. sarcoidosis 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 thickening of the nerves and any clinical evidence suggestive of leprosy is a general fit rejection.
79. **Sustans dysgenitismus** and **Hirsutus**: naevi may be considered fit. Intradermal naevi, 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** **Elephantiasis** may be considered fit on recovery.
83. **Candida** (presence graying of hair) may be considered fit if exist at naevi and no systemic association is seen.
84. **Ischaemias** may be considered fit on recovery.

85. All A1Hs are unfit.
86. Scars may be considered fit only on recovery.
87. A single 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. **Osteosarcoma:** Candidates to be considered fit after 12 weeks of post-operative period (E-)
- (a) There is a well healed surgical wound with no residual disease.
 - (b) No Post-Operative complications.
 - (c) Surgical scar should be sufficiently healed and unlikely to cause any problems during military training.
 - (d) Normal general physical examination.
 - (e) Radiologic work-up is normal.
89. **Tumours:** 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.

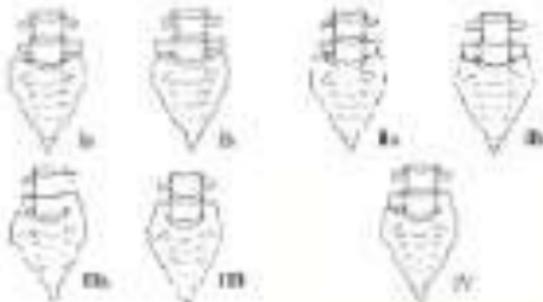
MUSCULOSKELETAL SYSTEM AND PHYSICAL CAPACITY

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 backache/ 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 fully acceptable and not associated with pain or restriction of movement.
- (a) If clinical examination reveals limitation of spine movement, deformities, tenderness of the spine or any gait abnormalities, it will be considered unfit.
 - (b) Gross kyphosis, affecting military bearing/ causing full range of spinal movements and/or expansion of chest is unfit.
 - (c) 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. When scoliosis is notifiable or any pathological condition of the spine is suspected, radiographic examination of the appropriate part of the spine needs to be carried out.

(d) **Tissue Biopsies:** The following entities should be looked for; on clinical examination and communicated with radiological evaluation.

- (i) Congenital entities overlying the spine ag. hypertridosis, skin discoloration, pigmented naevus or dermal cysts.
- (ii) Presence of lipoma over spine.
- (iii) Palpable spinotubercles.
- (iv) Abnormal findings on neurological examination.

92. Castellvi Classification for Lumbosacral Transitional Vertebrae (LSTV)



Castellvi Classification for LSTV

(a) **Type I:** Enlarged and dysplastic transverse process (at least 10 mm in width in cranio-caudal direction).

- (i) **Ia:** Unilateral.
- (ii) **Ib:** Bilateral.

(b) **Type II:** Pseudarthrosis of the transverse process and sacrum with incomplete biconcavity (synarthrosis) or non-union of the transverse process with pseudarthrosis.

- (i) **IIa:** Unilateral.
- (ii) **IIb:** Bilateral.

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

- (i) **IIIa:** Unilateral.
- (ii) **IIIb:** Bilateral.

- (d) **Type IV:** Type II on one side and type III on the contralateral side.
83. Spinal Conditions Listed for Air Force Status (With Flying and Ground Duties)
- (a) **Congenital Developmental Anomalies:**
- (i) Multiple Vertebrae.
 - (ii) Hemivertebrae.
 - (iii) Anterior Cervical Defect.
 - (iv) Cervical Ribs (Unilateral/Bilateral) with demonstrable neurological or respiratory deficit.
 - (v) Spina bifida. All types are unfit except in sacrum and L5/S1 if completely sacralized.
 - (vi) Loss of Cervical Lordosis with neurological deficit.
 - (vii) Abnormalities of Sutures. Abnormal suturing types 10 degrees for Lumbar Spine and 15 degrees for Thoracic Spine will be acceptable provided:-
 - (a) Individual is asymptomatic.
 - (b) No history of trauma to spine.
 - (c) No clear asymmetry/shoulder imbalance or pelvic obliquity in the lumbar spine.
 - (d) There is no neurological deficit.
 - (e) Non-marginal anomaly of the spine.
 - (f) There is absence of syndesmotic fusion.
 - (g) DCO is normal.
 - (h) No deformity exists at full flexion of the spine.
 - (i) No restriction of range of movement.
 - (j) No organic deficit causing structural abnormality.
 - (viii) Adams' scoliosis and Atlanto-axial anomalies.
 - (ix) Incomplete block vertebra at any level.

- (iv) Complete Sacro-vertebra at more than one level (single level is acceptable. Classification is to be made in APMSR-2).
- (v) **Lumbosacral Transitional Vertebra (LSTV)**: Unilateral sacralization or lumbarization (unacceptable) and bilateral sacralization or lumbarization (LSTV). Canalitis Type II a and b; III a and IV.
- Bilateral Complete Sacralization of L5/S1 and Bilateral Complete Lumbarization of S1/S2. LSTV Lumbis Type III b; Type I a and b are acceptable (Classification is to be made in APMSR-2).
- (vi) Spondylitis/Spondylolistheses.
- (vii) Intervertebral Disc Fringe
- (viii) Schmorl's Nodules at more than one level.
- (g) **Traumatic Conditions**
- (i) Spondylolysis/ Spondylolisthesis
- (ii) Compression fracture of vertebrae
- (iii) Anterolisthetic Disc Fringe
- (iv) Schmorl's Nodules at more than one level
- (h) **Infective**
- (i) Tuberculosis and other Granulomatous disease of spine (old or active)
- (ii) Infective Spondylitis
- (i) **Rheumatoid**
- (i) Rheumatoid Arthritis and allied disorders
- (ii) Ankylosing spondylitis
- (iii) Other rheumatological disorders of spine e.g Polymyalgia, SLE and Vasculitis
- (j) **Degenerative**
- (i) Spondylosis
- (ii) Degenerative Joint Disorders
- (iii) Degenerative Disc Disease

- (iv) **Osteoarthritis** (osteoarthrosis).
- (v) **Scheuermann's Disease (Adolescent Kyphosis)**
- (vi) Any other spinal abnormality, if so considered by the specialist.

CONDITIONS AFFECTING THE ASSESSMENT OF UPPER LIMBS

94. Amputation 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 at any part of limb including fingers will not be accepted for entry.

95. Fingers and Hand: 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 or clinical ulceration.
- (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 web space is satisfactory.
- (c) **Complex syndactyly:** Unfit.
- (d) **Hypertrophic finger joints:** All conditions shall be thoroughly assessed for hypertrophic finger joints. Any extension of fingers bending backwards beyond 90 degrees shall be considered hypertrophic and considered unfit. Other joints like knee, elbow, spine and thumb shall also be examined carefully for features of hypertrophy/hypertrophy. Although the individual may not show features of hypertrophy in other joints, isolated presentation of hypertrophy of finger joints shall be considered unfit because of the various ailments that may manifest later, if such conditions are subjected to rigorous physical training.
 - (i) **Mallet Finger:** Loss of extension 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 metacarpophalangeal (MCP) joint which can result in compromised hand function. Normal range of movement at distal inter-phalangeal (DIP) joints is 0-80 degrees and PIP joint is 0-90 degrees in both flexion and extension. In Mallet finger, the condition is unable to extend the distal phalanx of fingers completely.
 - (i) Candidates with mild condition i.e. less than 10 degree of extension loss without any evidence of trauma, pincer symptoms and any functional deficit must be declared fit.
 - (ii) Candidates with fixed deformity of fingers will be declared unfit.

96. **Wrist:** Functional limitation of movement of the wrist will be assessed according to the degree of stiffness. Loss of grip/strength is, rarely serious than loss of palmar flexion.

97. Elbow: Slight limitation of movement does not bar acceptance provided functional capacity is adequate. Arthralgia will entail rejection. Cubitus Valgus is said to be present when the carrying angle (angle between arm and forearm or anatomical position) is exaggerated. In absence of functional disability and obvious cause like a fracture mid-ulnar, fibrosis or the like, a carrying angle of upto 15° in males and 10° 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 strain military population is involved in. Also, the inability to return the elbow to within 10 degrees of the neutral position is important 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 person 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 anterior surgery will be unfit.

102. Clavicle: Nonunion of an old fracture clavicle will entail rejection. Mid-vestibular 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 fixed/semi-fixed varus angle of >10 degrees is unfit. Hallux valgus of any degree with bunion, corns or callus/area of callus/area of callus will be 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, calluses, exostosis or hyperkeratosis at meta-tarso-proximal joint (below toe deformity) are to be rejected.

106. Loss of any digit: Non union/rejection.

107. Extra digits will entail rejection if there is bony continuity with adjacent digits. Cases of synostosis will be rejected.

128. Pes Planus (Flat feet)

- (a) If the arches of the feet disappear on standing on toes, if the candidate can sit up and not roll 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/herself on toes, cannot sit up on the floor, under painful usual stress, persistent heel 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.

129. Pes Cavus and Talipes (Club Feet): With 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.

130. Ankle Joint: Any significant limitation of movement following previous injuries will not be accepted. Functional evaluation with imaging should be carried out where necessary.

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

132. Genu valgum (Knock knees) with intermalleolar distance > 7 cm in males and > 8 cm in females will be unfit.

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

134. 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.

135. Vocal lesions of the hip joint or early sign of arthritis will entail rejection.

Jointed Prostheses:

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

137. 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 limb) post injury which have been managed conservatively. Individual will be considered fit if these are:

- (i) No evidence of mal-alignment and union
- (ii) No bony-cortical defect.

- (ii) No soft tissue loss.
 - (iii) No functional deficit.
 - (iv) No evidence of secondary fibroplastic formation.
122. **Peripheral Vascular System**
123. **Varicose Veins:** All cases with active varicose veins will be declined until 100-40 cases of varicose veins die from a soft.
124. **Arterial System:** Current or history of abnormalities of the arteries and blood vessels e.g. aneurysms, arteritis and peripheral arterial disease will be considered soft.
125. **Lymphadenitis:** History of past cancer disease makes the candidate soft.

CENTRAL NERVOUS SYSTEM

126. **History of Mental Illness:** A candidate giving a history of mental illness or psychological afflictions will be rejected.
127. **Family History of Psychological Diseases:** When a history of nervous breakdown, mental disease, or suicide of a near relative is obtained, a careful reexamination of the patient's past history from a psychological point of view is to be conducted. Any evidence of even the slightest psychological instability in the patient's history or present condition must entail rejection.
128. **Family History of Epilepsy:** If a history of epilepsy is obtained in a near relative, then the candidate must be made soft and subjected to a detailed evaluation with appropriate investigations at the time of appeal.
129. **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. From a single attack of migraine with visual disturbance or migraineus apoplexy it is to be made soft.
130. **Fits and Convulsions:** History of epilepsy in a candidate is a cause for rejection. Seizures may manifest as "fits" and therefore the frequency and the conditions under which "fits" took place must be elicited. Such attacks will be made soft, whatever their apparent nature. An isolated fits/convulsions attack calls for enquiry into all the attendant factors to distinguish between syncope and seizures. Complex partial seizures are criteria for making the candidate soft.
131. **Heatstroke:** History of repeated attacks of heat stroke, hyperpyrexia or heat exhaustion has employment for Air Force duties, as it is an evidence of a faulty heat-regulating mechanism. A single severe attack of heat stroke provided the history of exposure was severe, and no permanent sequelae were evident is, by itself, not a reason for rejecting the candidate.

- 125. Head Injury or Concussion:** A history of severe head injury/failure of medical biopsy of neurological damage or any residual body deficit in the candidate is a cause for rejection. Presence of two holes will be because for rejection.
- 126. Psychosis:** All candidates, who are suffering from psychosis are to be rejected. Drug dependence in any form will also be a cause for rejection.
- 127. Prostitution:** Mentally unstable and ramonic individuals are unfit for commissioning. Juvenile and adult delinquency, history of nervous breakdown or chronic ill-health are causes for rejection.
- 128. Organic Nervous Conditions:** Any evident neurological deficit will call for rejection.
- 129. Tremors:** Persistent tremors even after remunerating the candidate will be unfit. On appeal only pathological tremors will render the candidate unfit.
- 130. Stammering:** Candidates with stammering will be declared unfit. Stammering will be made and it, even if it is first detected during the time of appeal medical board.
- 131. 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 soft and subjected to detailed evaluation and appropriate investigations at the time of appeal by the psychiatrist.**
- 132. Hyperactive Friends: Lawless** will be considered fit in the absence of any other neurological abnormality.

EAR, NOSE AND THROAT

133. 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 - Free commensal surgery with residual mid 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 > 10 mm 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.
 - (ii) Asymptomatic rhinorrhea: Unfit.

(b) Any sensory/clinical evidence suggestive of allergic rhinitis/rhinorrhea thesis or to be declared unfit.

(c) 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.

(d) **Nasal polypsis**, unfit (treated or untreated).

137 Oral Cancer:

(a) **Tumours:**

(i) Current operated cases of leukoplakia, erythroplakia, carcinoma fibrosa, ameloblastoma and oral carcinoma.

(ii) Current oral ulcers/ growths and mucous retention cysts.

(iii) Tumours due to any cause.

(iv) Cleft palate, even after surgical correction.

(b) **Defects:**

(i) Completely healed oral ulcers after four weeks post-surgery with proven benign histopathology.

(ii) Operated cases of mucous retention cyst with no recurrence and proven benign histology. Evaluation in these cases should be done after minimum 12 weeks post-surgery.

(iii) Sub-erosive cleft of palate with or without bony union not causing functional impairment may be accepted by EPMI specialist provided PTA, tympanometry and speech are normal.

138 Pharynx and Larynx: The following conditions are unfit:

(a) Any ulcerative/ raised lesion of the pharynx.

(b) Candidates in whom tonsillectomy is indicated. Such candidates may be accepted maximum 62 weeks after successful surgery provided there are no complications 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 polyp, laryngeal polyps and growths.

139. Endotracheal tube Dysfunctions: Obstruction or insufficiency of endotracheal tube function will be a cause for rejection. Alveolar chamber air clearance test will be carried out before acceptance in respiratory candidates.

140. Tinnitus: Unfit.

141. Susceptibility to motion sickness: Specific inquiry should be made for any susceptibility to motion sickness. An endorsement to this effect should be made in AFMSE-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 result in rejection.

142. Hearing loss: The following are not acceptable:

- Hearing acuity below 60 dB in CT or EW.
- The audiometric loss greater than 20 dB. at frequencies between 250 and 8000 Hz in PTA.

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

- Gross deformity of pinna which may hamper wearing of military personal kit/protective equipment, or which adversely impacts military hearing.
- Cysts of cholesteatoma sacrum.
- Any condition (ear wax, granulomatous of external auditory meatus or sebaceous, exaggerated tortuosity of the canal, bony growth of external auditory canal) preventing a proper visualization of the tympanic membrane.
- Inflammation or polyp in external auditory canal.

144. Middle Ear: The following conditions of middle ear will result in rejection:

- Otitis Media:** Current thin fluid of any type will result in rejection. If evidence of healed chronic otitis media (in the form of tympanosclerosis/harmed tympanic membrane affecting only part area of tympanic membrane) and all related cases of tymnoplasty/tympanoplasty will be assessed by ENT specialist. They will be acceptable if Pure Tone Audiometry (PTA) and tympanometry are normal. On appeal, a test of decompression chamber may be carried out, if indicated, for airmen, ATUAC, submarine sailors.
- Any type of TM perforation or healed perforation/retraction in pars flaccida of the tympanic membrane is unfit.
- Marked retraction or destruction in TM mobility on pneumatic otoscopy.
- Tympanometry showing pattern other than Type 'A' tympanogram.

- (e) Any implanted hearing devices eg cochlear implants, bone-anchored hearing aids
- (f) After middle ear surgery viz. mastoidectomy, ossiculoplasty, any type of mastoidectomy.

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

- (a) Otitis media.
- (b) Meniere's Disease.
- (c) Vestibular dysfunction including synesthesia of vestibular origin.
- (d) Bell's palsy following ear infection.

Ophthalmic Errors:

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) Visual acuity:

- (i) Candidates, who meet the following criteria are **Fit**
 - (a) Mild phoria.
 - (b) Clear visual axis.
 - (c) Normal visual field.
 - (d) No sign of divergent strabismus based fit: 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 0.2 mm below the superior limbus.

(c) Exotropia Unfit:

- (d) **Sabecocik:** If size difference between the pupils is >0.5 mm, candidate will be considered unfit.

(e) Heterochromia Iridis: Unfit

- (f) **Sphincter spasm:** Can be considered fit, if size difference between pupils is <0.5 mm, pupillary reflexes are brisk with no observed pathology in cornea, lens or retina.

(g) **Entropion** - 1 int:

(i) **Staphylosis:** Candidates with blepharitis, particularly with loss of eyelashes, may be rejected.

(ii) **Entropion Entropies:** These cases are to be made soft. On appeal, medical opinion and acceptance which in the opinion of ophthalmologist will not hamper day to day functioning in any way, may be made soft.

(iii) **Pterygium:** All cases of pterygium are to be made soft. On appeal, progressive non-torsional pterygium occupying ≥ 1.5 mm of the peripheral cornea may be made soft by Eye Specialist after measurement on a slit lamp.

(iv) **Sympathetic:** All cases of sympathicus are to be made soft except for physiological sympathetic.

(v) Naso-lacrimal duct occlusion producing epiphora or a mucocoele unless rejection.

(vi) Astigmatism (rule, cylinder and oblique) will be granted for rejection. Candidates giving a history of this condition should be made soft.

(g) **Cataract:**

(i) 1 int:

(ii) Cataract scotopexies

(iii) Any candidate with progressive cataract disorders, viz., Coronal dysgenesis, Keratogenesis, Keratophakia, any corneal degenerations.

(iv) Any active cataract disorder.

(v) On appeal cataract scars are acceptable if it does not interfere with vision.

(g) **Lenticular opacities - 1 int:**

On appeal:

(i) **Unif:** Any lenticular opacity that is causing visual deterioration or is in the visual axis or central area of 14 mm around the pupil is unfit. The propensity of the opacities not to increase in size or number should also be considered.

(ii) **Fr:** - Small stationary lenticular opacities in the periphery like conjunctival fine dot cataract, not affecting the visual axis/visual field should be less than 10 mm in number and central area of 14 mm should be clear.

(g) **Optic Nerve Diseases** - 1 int:

(i) **High Opt. Disc ratio** - 1 int, if any of the following conditions exist:

- (i) Eyes-like asymmetry in eye disc ratio > 1.2.
 - (ii) Retinal Nerve Fiber Layer (RNFL) defect seen by ENFL analysis in Optical Coherence Tomography (OCT).
 - (iii) Visual field defect detected by Visual Field Analysis.
- (iv) Migraine with visual symptoms are not a strictly major problem and should be assessed in accordance with para 124.
- (v) As tests for right blindness are not routinely performed, a certificate to the effect that the individual does not suffer from right blindness will be obtained in every case. Certificate should be as per **Appendix C** to this chapter. A proven case of right-blindness is suffice.
- (vi) Restriction of movement of the eyelid or any distortion and undue depression/protrusion of the eyelid are suffice.
- (vii) **Retinal lesions:** A small focal circumferential scar in the visual periphery not affecting the vision and not associated with any other complications will be considered fit. Similarly, a small lesion in periphery with no other complications will be made fit. **Any lesion in the central fovea will be made unfit.**

(viii) **Lattice degeneration.**

- (i) The following lattice degeneration will consider 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 atypic hole/flag zones (classified)
 - (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.

(a) Post-laser ablation, single circumferential lattice without holes flap test, less than one clock hour extent in either or both eyes.

(b) Post-laser ablation, two circumferential lattices, without holes flap test, each being less than one clock hour extent in either or both eyes.

(c) **Keratoconus:** Keratoconus is unfit.

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

148. Myopia

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

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

(a) **TR**

- (i) Candidates for LSF meeting the visual requirements for the branch as laid down in Appendix D to para 145. Residual refraction after such procedure should not be more than +/- 1.0 D Sph or Cyl for branches where uncorrected refractive errors are permitted.
- (ii) Keratoconus Surgery must not have been carried out before the age of 20 years.
- (iii) At least 12 months must have elapsed post uncomplicated visus Keratoconus 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 O.H. master.
- (v) The post Keratoconus Surgery corneal thickness as measured by a corneal Pachymeter must not be less than 450 microns.

(b) **Diseases**

- (i) Radial Keratotomy (RK) surgery for correction of refractive errors;
 - (ii) Individuals with high refractive errors (> 6.00 D) prior to Keratoconus Surgery.
150. **Cataract Surgery:** 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), trabeculotomy, Glaucoma surgeries with or without implants, Corneal Grafts (including with Rhofermax (CRM) PTEACK), any intraocular 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 recruits will be mainly based on the assessment of the fusion capacity. A strong fusion sense insures the maintenance of binocular vision in the face of stress and fatigue. Hence, it is the main criteria for acceptability.

(a) **Convergence (as assessed on KAF rule)**

(i) **Objective Convergence**

- (a) Up to 10 cm - Fit.
- (b) 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 especially so when the objective convergence is 10 cm and above.

(b) **Accommodation**: In the case of recruits, 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 Yrs	17.25	21.25	26.30	31.35	36.40	41.45
Accommodation (in cms)	10.11	11.12	12.513.5	14.16	16.18.3	18.527

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 3 in this chapter.

155. Any clinical disorder 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 T
(Refers to para 2 (v)
Optokinetics Standard)

CERTIFICATE REGARDING NIGHT BLINDNESS

Name: WILLIAMS _____
Batch No. _____ Chart 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)

Certified and signed by

(Name of Medical Officer)

Appendix D

(Specs & Criteria of Optometriology standards)

VISUAL STANDARDS FOR MALE FEMALE CANDIDATES AT INITIAL ENTRY

No.	Med Cat	Branch	Maximum Limit of Refractive Error	Vision Acuity (VA) with limit of maximum correction	Colour Vision
1	A&H	FOP including WS&S, Flying Branch Candidates at MDA and AFA	Hypertropia - +1.5D Sph Manifest Myopia: Nil Astigmatism: -0.750 D/Cyl Hypermetropia - +1.5 D Max Heterotropia: Myopia: Nil	6/6 in one eye and 6/9 in other, correctable to 6/6 only for Hypertropia	CP-I
2	A&H	10-25DA Entry to General duty branches of AFW(A&L), Adm. Lgo	Hypertropia: +2.5D Sph Myopia: -2.5D Sph Astigmatism: +/- 2.00 Cyl	Uncorrected VA 6/6 & 6/6 Best Corrected VA 6/6 & 6/6	CP-II

Note 1: Ocular muscle balance for personnel involved in St. Nos. 1 and 2 should conform to Appendix E in this Chapter.

Note 2: Visual standards of Air Wing Candidates at MDA and 10 DA/10 of 1 (P) at AFA should conform to AACI IOP standard (SI. No. 1 of Appendix D).

Note 3: The Sph correction factors mentioned above will be inclusive of the specific astigmatic correction factor. A minimum correction factor upto the specified visual acuity standard can be accepted.

Appendix E

(Refer para 134)

STANDARD OF OCULAR MUSCLE BALANCE FOR FLYING DUTIES

Ser. No.	Test	Fr
1	Maddox Rod Test at 60 cm	Exo - 06 Prism D Exo - 06 Prism D Hyper - 01 Prism D Hypo - 01 Prism D
2	Maddox Rod Test at 34 cm	Exo - 05 Prism D Exo - 06 Prism D Hyper - 01 Prism D Hypo - 01 Prism D
3	100D Test at 100cm H.P. 720	All of 100V graticule
4	Cvergence	Up to 10 cm
5	Cover Test for Distance and Near	Lateral divergence/convergence necessary rapid and complete

Hematopoietic Diseases

156. All cases of anaemia (<11 g/dL in males and <11.5 g/dL in females) will be declared unfit during SSB.
157. All conditions with evidence of hereditary haemolytic anaemias (due to red cell membrane defect or due to red cell enzyme deficiencies) and haemoglobinopathies (Sickle cell disease, Hb-Haemoglobinopathy, Major, Intermediate, Minor, Trait and Alpha Thalassassemia etc) are to be considered unfit for service.
158. Candidates with history of haemophiliac 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 Nephritis (purple eye bruising), a benign disorder seen in otherwise healthy persons, may be accepted.
159. **Monocytes:** Absolute monocyte count greater than 1000/mm³ or more than or equal to 10% of total WBC is to be declared unfit.
160. **Eosinophilia:** Absolute eosinophil count greater than or equal to 500/mm³ is declared unfit.
161. Haemoglobin more than 16.2 g/dL in males and more than 15 g/dL in females will be considered as Polycythaemia and declared unfit.

Dental Fitness Standards

162. Dental Standards

- (a) Candidates must have a total maximum 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.
- Any four of the six anterior.
 - 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) **Oral Facial Examination:** Presence of any gross asymmetry or oral/hand/limb deformities or if any occupant pathological condition of the jaw is suspected, it will be cause of rejection.

(b) Functional Examination

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

- (iv) **Maxillary Opening:** A mouth opening of less than 35 mm measured at the maxillary edge will be reason for rejection.

154. Guidelines for Awarding Dental Points in Special Situations:

- (a) **Dental caries:** Teeth with caries that have not been removed or teeth associated with broken dentures, crowns, pulp exposure, residual root stumps, teeth with abscesses and/or sinusitis will not be counted for award of dental points.
- (b) **Extractions:** Teeth having restorations that appear to be improper/broken/facilitated will not be awarded dental points. Teeth extracted 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:** Luxatoblastic 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:** Natural deciduous teeth will not be awarded dental points.
- (e) **Morphological Defects:** Teeth with structural defects which compromise efficient classification will not be awarded dental points.
- (f) **Periodontitis:**
- (i) The condition of the gingiva, of the teeth included for counting dental points, should be healthy, speak 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 gingiva or those with visible calculus) will not be awarded dental points.
 - (iii) Candidates with severe periodontal disease (generalized calculus, extensive recession and red gingiva, with or without exudate), 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, health can be gained 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 daily efficiently, then candidate 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 opposition.
- (ii) **Anterior Open Bite**: Anterior open bite is to be taken as lack of functional opposition of involved teeth.
- (iii) **Cross-Bite**: tooth-to-cross-bite may still be in functional occlusion and may be avoided points, if so.
- (iv) **Transverse Bite**: Anterior teeth involved in a step-jaw-opening bite, which is causing traumatic retraction on the palate will not be counted for point of points.
- (v) **Hard and Soft tissues**: soft tissues of cheek, lips, palate, tongue and oropharyngeal region and maxillo-mandibular bone apparatus must be assessed for any swelling, ulceration, abscess, scars, white patches, oral mucous fibrosis etc. All potentially malignant lesions will be cause for rejection. Clinical diagnosis for submucous fibrosis with or without restriction of mouth opening will be a cause of rejection. Bony lesions will be assessed for their pathological/physiological nature and committed upon accordingly. Any hard or soft tissue lesion will be a cause of rejection.
- (vi) **Orthodontic Appliances**: Fixed orthodontics- Lingual retainers will not be considered as periodontal spurs and teeth included in these retainers will be avoided points for dental spaces. Candidates wearing fixed or removable orthodontic appliances will be disqualified.
- (vii) **Dental Implants**: implants and implant supported prostheses will not be avoided any dental points. In the case of ex-serviceman applying for war-decoration, dental points will be awarded for removal dental prostheses.
- (viii) **Fixed Partial Dentures (FPD) / Implant-supported FPDs**: FPDs will be assessed clinically and radiologically for firmness, functional opposition to opposing teeth and periodontal health of the abutments. If all parameters are found satisfactory, dental points will be awarded for the natural teeth (abutments).
- Note** - Any prosthesis, removable/ fixed or captive bone; the natural teeth/bone at that component will be awarded dental points.

15E. The Following will be Criteria for Declaring a Candidate Unfit-

- (i) **Oral Hygiene**: Poor oral health status in the form of gross visible calculus, periodontal pocket and/or bleeding from gingiva will render candidate unfit.
- (ii) **Condition Existing Post-Maxillo-Facial Surgery/Mandibular Trauma**: Candidates, who undergo craniomaxillary or post-traumatic maxillofacial surgery/trama will be UNFIT for at least 28 weeks from the date of surgery/recovery 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.

- (ii) Candidate with dental arches affected by advanced stage of generalized active lesions of pyorrhoea, acute ulcerative gingivitis, and gross abnormality of the teeth at joints of with radiolucent areas or septic teeth will be rejected.

Assessment of Women Candidates

156. History: Detailed menstrual and obstetric history, in addition to general medical history, must be taken and recorded. If a history of menstrual, ovarian or pelvic abnormality is given, an opinion of gynaecologist is to be obtained.

157. General Medical and Surgical Standards

- (a) Any lump in the breast will be a cause for rejection. Cases of fibroadenoma breast after successful surgical removal may be considered fit with the opinion of a surgical specialist and a normal histopathological report.
- (b) Galactorrhea will be cause for rejection. Female after investigation treatment may be considered based on merits of the case and opinion of the concerned specialist during AMB.
- (c) Amenorrhoea, polyuria and polyuria (Adrenocortical supply will be considered unfit during SMD. Operated cases of Polyuria/Polyuria will be considered fit after 12 weeks of post-operative period after surgery, if there is a well healed surgical wound and no post-operative complications).

158. Gynaecological Examination: Any abnormality of external genitalia will be considered as cause of unfitness.

- (a) Following conditions are unacceptable-
- Congenital elongation of uterus which comes up to umbilicus.
 - Amenorrhea type of congenital uterine anomaly.
- (b) Following conditions will entail rejection..
- Anomalous will be grounds for rejection. Such anomalies will be investigated, and fitness will be considered on merits after examination and investigations during AMB.
 - Severe micturition and urticaria dysmenorrhoea.
 - Female urinary incontinence.
 - Congenital elevation of cervix or complete prolapse which comes outside the introitus even after corrective surgery. (Complete prolapse of uterus will be a cause for rejection. Major degree, after surgical correction, may be considered fit based on merits.)

- (ii) Acute or chronic pelvic infection, Endometriosis and Adenomyosis.
 - (iii) Disorders of sexual differentiation.
 - (iv) Significant anomalies especially with regardation of hair growth.
- (c) Any other gynaecological condition not covered above will be considered on merits of each case by Gynaecologist.

Pregnancy:

169. Current pregnancy would be a cause for rejection. The maximum period after which the candidate will be assessed for appeal post pregnancy would be as follows:-

- (a) **Vaginal delivery:** 24 weeks after an uncomplicated vaginal delivery.
- (b) **MTD Absence:** Minimum four weeks and up to 12 weeks.
- (c) **Cesarean section:** 12 weeks after uncomplicated cesarean section delivery.

170. The individual would then be examined by the Gynaecologist and assessed regarding her fitness. In cases wherein more than six months have elapsed after the initial medical examination, the candidate would be subjected to repeat complete medical examination as per the existing regulations.

171. **Ultrasonography of Lower Abdomen and Pelvis for Uterine Cavity:** This would be done as per existing criteria:-

- (a) **Ex-**
 - (i) Single small fibroid uterus (0.5 cm or less in diameter) without symptoms.
 - (ii) Unilocular clear ovarian cyst less than 10 cm in diameter.
 - (iii) Congenital stenosis of cervix (which causes up to infertility).
 - (iv) Accurate uterine type of congenital uterine anomaly.
 - (v) Minimal fluid in Pouch of Douglas.
- (b) **Cafe-**
 - (i) Candidates with fluid in Pouch of Douglas with internal echoes.
 - (ii) **Utero:** Absence of uterus or any congenital uterine abnormality except accurate uterus.
 - (iii) **Fibroids,**

- (iii) Multiple fibroids more than two in number, with largest one > 15 mm in size;
- (iv) Single fibroid larger than 60 mm in size;
- (v) Any fibroid causing distortion of abdominal cavity.
- (vi) Adenomyosis.
- (vii) **Adenoma**
- (i) Simple ovarian cysts (6 cm or more in size);
- (ii) Complex ovarian cysts of any size;
- (iii) Endometrioma;
- (iv) Hydrosalpinx;

(c) During Appeal Medical Board Review Medical Board, unit candidates will be subjected to specific investigations and detailed clinical examination. Criteria for specific conditions will be decided as given below:-

- (i) Fluid in PAXI with internal echoes will be assessed with TGC, DGC and C-Reactive Protein, Senior Advisor (Obst and Gynaec) to opine on fitness.
- (ii) Endometrial thickness > 15 mm or residual adenosome shadow in abdominal cavity, Senior Advisor (Obst and Gynaec) to opine on fitness.

172. Medical Fitness after Laparoscopic Surgery or Laparotomy: Candidates reporting after undergoing cystectomy or myomectomy will be accepted as fit, if the candidate is asymptomatic, ultrasound pelvis is normal, histopathology report of removed tissue shows benign pathology and per-operative findings are not suggestive of endometriosis. Fitness to be considered after laparoscopic surgery once the wound has healed fully. Candidate will be considered fit after cesarean section and laparotomy after one year of the surgical procedure.

APPENDIX V

(BRIEF PARTICULARS OF THE SERVICE ETC.)

1. Before a candidate joins the Academy, the parent or guardian will be required to sign ---
- (a) A certificate to the effect that he fully understands that his/her son or ward shall not be entitled to claim any compensation or relief from the Government in respect of any injury which his son or ward may sustain in the course of or as a result of the training or where bodily injury or death results in the course of or as a result of a surgical operation performed upon or anaesthesia administered to teacher for the treatment of any injury received as aforesaid or otherwise.

- (b) A bond to the effect that if, on account of his dismissal or discharge or withdrawal from National Defence Academy for knowingly furnishing false particulars or suppressing material information in his application for admission to the said National Defence Academy or in the event of his/her being voluntarily resigning from the said National Defence Academy or for any reason not beyond the control of the cadet, he/she does not complete the prescribed period of training, or fails to, the cadet, does not accept a Commission if offered as enumerated above, then the Commandant and the cadet shall jointly and severally be liable to pay forthwith to Government as such sum as the Government shall fix but not exceeding such expenses as shall have been incurred by the Government on account of the Cadet in further training and all the money received by the Cadets as pay and allowance from the Government together with interest on the said money calculated at the rate in force for Government loans.
3. The cost of training including accommodation, books, uniforms, boarding and travel instrument will be borne by the Government. Parents or guardians of cadets, will, however, be required to meet their pocket and other private expenses. Normally these expenses are not likely to exceed Rs. 3000.00 p.m. If in any case a cadre's parents or guardian is unable to meet wholly or partly even this expenditure financial assistance of Rs. 1000.00 p.m. for the period of training may be granted by the Government whose parents income is less than Rs. 20,000/- per month. Cadet whose parent's or guardian's income exceeds Rs. 20,000/- per month will not be liable for the assistance. If more than one survived contributor undergoing training at NDA, INA, OTA and corresponding training establishment in the Navy and Air Force, then both would be eligible for the financial assistance.

The prequalification of a candidate desirous of having financial assistance from the Government should immediately after his confirmed having been finally selected for training at the National Defence Academy submit an application through the District Magistrate of his District who will forward the application with his recommendation to the Commandant, National Defence Academy, Khadakwasla, Pune-411021.

3. Candidates finally selected for training at the Academy will be required to deposit the following amount with the Commandant, National Defence Academy, on their arrival there:—

(a)	Ticket allowance for five months @ Rs. 500.00 p.m. (max.)	Rs. 15000.00
(b)	For issue of clothing and equipment (Cost of clothing and equipment for candidates will be reimbursed subsequently at the time of issuing instructions)	
(c)	Army Group Insurance Fund	Rs. 7200.00
(d)	Clothing items required at the time of joining (Cost of clothing and equipment for candidates will be reimbursed subsequently at the time of issuing Instructions)	
(e)	Incidentals (expenses during tour overseas)	Rs. 13175.00
Total (less See (b) & (d) to be added later)		Rs. 25275.00

Out of the amount mentioned above the following amount is refundable to the cadets in the event of financial aid being sanctioned to them—

- (a) Student Allowance @ Rs. 100.00 Per Month.
- (b) For items of clothing and equipment
(brought at the time of joining).

4. The following Scholarships/Financial Assistance are available at the National Defence Academy.

(I) **PARASURAM BHAU PATWARDHAN SCHOLARSHIP**— This scholarship is granted to cadets overall first in Academy of Flying and Gunnery. One time scholarship amount is Rs. 5000/-

(II) **COLONEL KENDAL FRANK MEMORIAL SCHOLARSHIP**— The scholarship is of the value of Rs. 2000.00 per annum and awarded to a MAHALAHA cadet who should be the son of an ex-serviceman. The scholarship is in addition to any financial assistance from the Government.

(III) **ASSAM GOVERNMENT SCHOLARSHIP**—Two scholarships will be awarded to the cadets from ASSAM. The value of each scholarship is Rs. 2000 per annum and is tenable for the duration of a cadet's stay in the National Defence Academy. The scholarships will be awarded to the two best cadets from ASSAM without any reference to the income of their parents. The cadets who are granted this scholarship will not be entitled to any other financial assistance from the Government.

(IV) **UTTAK PRADESH GOVERNMENT INCENTIVE SCHEME**—The Panchayat Samiti Parivartan Nidhi a Trust under Hon'ble Governor of Uttar Pradesh has started a incentive scheme for cadets young NDA/NAIDHA/AF Academy/National Academy/Female Entry who are wards of ex-serviceman widows upto R 10 rank and are domicile of State of Uttar Pradesh in which there is a provision of one-time grant of Rs. 50,000/- for each cadet selected as a special incentive.

(V) **KERALA GOVERNMENT SCHOLARSHIPS**— All male/female cadets irrespective of gender and without any pre conditions to all Kerala state cadets who are admitted to CDS/NAIA, INA, Naval Academy, Air Force Academy, Armed Forces Medical College, KMC Schools, as a consolation shall be granted Rs. 2,00,000/- only and those who get admission to Military, Naval and Air Force Training Schools shall be granted as a consolation Rs. 1,00,000/-

(VI) **BHARTI LAL MANDAVINI PRIZE**— This is cash prize of Rs. 500.00 available for the best B.Tech/LL.B boy in each Course of the Academy. Application Form are available with the Commandant, National Defence Academy.

(VII) **ORISSA GOVERNMENT SCHOLARSHIPS**— These scholarships, one for the Army, one for the Navy and the other for the Air Force of the value of Rs. 10,000/- each per month will be awarded by the Government of Orissa to the cadets who are permanent residents of the State of ORISSA. Two of these scholarships will be awarded on the basis of merit consideration of the cadets whose parent's or guardian's income does not exceed

Rs. 3,000/- per annum and the other one will be given to the best cadet irrespective of his parent's or guardian's income.

S.No	State Government	Amount	Eligibility
(9)	West Bengal (i) The cadre must be Finance related Lump sum grant paper must be Scholarship per semester	Low Middle High 5000/- 1750/- 2500/- 1000/- 1450/- 900/-	(i) The cadre must be Indian Citizen and the cadre and his brother(s) permanently domiciled in the State of West Bengal. (ii) The Cadet is not in receipt of any other financial assistance / grant from the Govt. of India and/or the State Government or any other authority excepting scholarship or stipend received on merit.
	Table Income group		
	Low - up to Rs. 9000/-per		
	Middle - Rs. 9001/- to Rs. 18000/-per		
	High - Above 18000/-per		
(10)	Goa Rs. 1000/- per month during the period of training subject to a maximum of 24 months or duration of the course whichever is less & one time scholarship of Rs. 12,000/-		(i) The income level of the cadet's parent/guardian shall not exceed Rs. 15,000/- per month (Rs. 1,30,000/- per annum). (ii) The maximum limit of these belonging to SC/ST/OBC should not exceed Rs. 21,200/- per month (Rs. 2,54,400/- per annum). (iii) He should not be receiving financial assistance/ scholarship from any other source.
(11)	Sikkim	Rs. 1,00,000/- crisscross payment	Should be domicile of Sikkim State
(12)	Madhya Pradesh	Rs. 1,00,000/- crisscross payment	Should be domicile of Madhya Pradesh State
(13)	Arunchal Pradesh	Scholarship Rs.1,000/- per the month Otherwise Rs. 12,000/-	Should be domicile of Arunchal Pradesh State

(13)	Cadet	Scholarship Rs. 6,000/- per annum.	To the ward of Serving/Ex-servicemen and Ex-Servicemen (Officer) of National Cadet Corps of Gujarat.
(14)	Unattached	<p>(a) Prakar Money Rs. 250/- per month for NDA Cadets of Jharkhand domicile is paid to father/guardian of cadets (Ex-Servicemen/Widow), through respective Zilla Swastik Kalyan Officers.</p> <p>(b) Cash Award of Rs. 20,000/- for NDA Cadets of Jharkhand domicile is paid to father/guardian of cadets through Directorate of Higher Education, Jharkhand.</p>	
(15)	Prayag	Rs. 1,00,000/-one time payment.	Should be domicile of Prayag State.
(16)	State Level Welfare	Rs. 1.5 lakh for all OBC entry scholars.	Award for successful candidates of selection for all Officer category scholarships.
(17)	Engineering (Mohan Singh Sandhu Memorial Scholarship)	One time payment to the first and second best all round Air Force cadets of VI th term amounting to Rs. 150/- and Rs. 100/- respectively.	

(18) HIMACHAL PRADESH GOVERNMENT SCHOLARSHIP— Free scholarship will be awarded to cadets from HIMACHAL PRADESH. The value of such scholarship is Rs. 300/- per month during the first two years of training and Rs. 400/- per month during the third year of training. These scholarships will be available to those cadets whose parent's income is below Rs. 200.00 per month. No credit in respect of financial assistance from the Government will be eligible for this scholarship.

(19) TAMIL NADU GOVERNMENT SCHOLARSHIP—The Government of Tamil Nadu has instituted a NDU one scholarship per course of the value of Rs. 30/- per month plus an extra allowance of Rs. 400/- (one only during the entire period of cadet's training) to be accorded to a cadet belonging to the State of TAMIL NADU whose parent's/guardian's monthly income does not exceed Rs. 500/- The application by an eligible cadet can be made to the Commandant, National Defence Academy or their service.

In addition to the existing Scholarships, Directorate of Ex-Servicemen Welfare, Chennai under Tamil Nadu Government has sanctioned a one-time grant of Rs. 1,00,000/-Rupees One Lakh Only to the eligible children of Ex-Servicemen who join NDA/MA/NAFA or Air Force Academy as Permanent Commissioned Officers.

(18) KARNATAKA GOVERNMENT SCHOLARSHIPS— The Govt. of Karnataka has awarded scholarships to cadets from Karnataka State who join the National Defence Academy. The value of the scholarship shall be Rs.1,500/- (Rupees One Thousand Five Hundred only) per month and extra allowance upto first term Rs.10,000/- per annum.

(19) ALBERT ENKA SCHOLARSHIP— The Government of Bihar has initiated a NDA 25 Merit Scholarships at Rs. 50/- per month for entire period of six terms at the NDA and Rs. 125/- per term towards clothing and equipment. The cadets availed the above merit scholarship would not be eligible for any other scholarship or financial assistance from the Government. The application by an eligible cadet can be made to the Commandant, National Defence Academy on their arrival.

(20) PG OFFICER DV PINTOO MEMORIAL SCHOLARSHIP— Dr. Capt. M. Vidyasagar has instituted 3 scholarships of Rs. 125/- each per month at NDA for one term to be awarded to the first three cadets in the order of merit on completion of their first semester till end of second term. The cadets in receipt of Govt. Financial Assistance will not be eligible for the above scholarships. The application by eligible cadets can be made to the Commandant, NDA on arrival.

**(21) FINANCIAL ASSISTANCE TO WARDS OF EX-SERVICE MEN—
MAHARASHTRA STATE—** The worth of Maharashtra ex-service officers/cadets who are undergoing training as cadets at NDA will be given Rs. 50,000/- as one time assistance.

The parents/guardians of the wards should submit their applications to their respective Zilla Sanik Welfare Office along with the certificate obtained from the Academy. Terms and conditions governing these scholarships are obtainable from the Commandant, National Defence Academy, Khadakwasla, Pune - 411 023.

(22) AWARD OF FINANCIAL ASSISTANCE TO CANDIDATES OF HARYANA DOMICILE UNDER TRAINING AT NDA— The Haryana State Govt. has declared a cash award of Rs. 1,00,000/- (Rupees one lakh) to every individual who successfully completes the training at NDA/MAINS and other Defence Academies of National Status and dominion of State of Haryana.

(23) INCENTIVE GRANT TO CADETS DOMICILE OF UT. CHANDIGARH UNDER TRAINING AT NDA— Chandigarh Administration has introduced the scheme for grant of one time incentive of Rs. 1,00,000/- (Rupees one lakh) to the cadets who are resident of UT. Chandigarh and joined NDA.

(24) SCHOLARSHIP/GRAUNT FOR NCT DELHI— The cadets undergoing training at NDA and who are bona fide residents of NCT Delhi will get a monthly grant of Rs. 2000/- A bona fide resident would mean those cadets whose permanent home address recorded in the documents at the time of joining NDA is that of National Capital Territory of Delhi (and does not include Noida). This would be needed to be supported with a copy of the residence proof (Aadhar Card, Voter Identity Card, Service Records of their parent etc.).

TRAINING

5. The selected candidates for the three services viz. Army, Navy and Air Forces are given preliminary training both academic and physical for a period of 3 years at the National Defence Academy which is an inter-Service institution. The training during the first two and half years is common to the cadets of three wings. All the credits on passing out will be awarded degrees from Jawaharlal Nehru University (JNU) as under:-

(a)	Army Cadets	-	B.Sc/B.Sc (Computer)/B.A.
(b)	Navy Cadets	-	B.Tech Degree*
(c)	Air Force Cadets	-	B.Tech Degree* B.Sc/B.Sc (Computer)

Note*: All the cadets undergoing B.Sc/B.Sc(Computer)/B.Tech Degree programme shall be awarded the degree on the successful completion of Academic, Physical and Service Training at NDA. All the cadets undergoing B.Tech programme shall be awarded the B.Tech degree on the subsequent Pre-Commissioning Training Academies' Institutions/ Ships/ Air Craft.

The selected candidates of the Naval Academy will be given preliminary training both academic and physical, for a period of 04 years at Indian Naval Academy, Ezhimala. The cadets of 10+2 Cadet Entry Scheme will be awarded a B. Tech. Degree on successful completion of training.

6. On passing out from the National Defence Academy, Army Cadets go to the Indian Military Academy, Dehra Dun, Naval Cadets to Indian Naval Academy, Ezhimala and Air Forces cadets and Ground Day-Night Tech students to Air Force Academy, Hyderabad and Air Force cadets of Ground Duty-Tech students to Air Force Technical College, Bangalore.

7. At the INA, Army Cadets are known as Gentlemen/Lady Cadets and are given intensive military training for a period of one year aimed at turning them into officer capable of leading infantry Sub-units. On successful completion of training, Gentlemen/Lady Cadets are granted Permanent Commission in the rank of Lt subject to being medically fit in "SDAPS" test.

8. (a) The Naval cadets are selected for the Executive Branch of the Navy, on passing out from the National Defence Academy and are given further training at Indian Naval Academy, Ezhimala for a period of one year on successful completion of which they are promoted to the rank of Sub-Lieutenants.

(b) Selected candidates for the Naval Academy under 10+2 Cadet Entry Scheme will be inducted as Cadets for four years B.Tech course in Applied Electronics & Communication Engineering (for Executive Branch), Mechanical Engineering (for Engineering Branch including Naval Architect specialization) or Electronics & Communication Engineering (for Electrical Branch) as per Naval requirement. On completion of the course, B.Tech Degree will be awarded by Jawaharlal Nehru University (JNU).

9. (a) Air Force Flying Branch Cadets receive Flying training for a period of one and a half years. On successful completion of one year of basic flying training (Phase I), they are granted Permanent Commission (in position) in the rank of Flying Officer, for a period of six months. Permanent Commission is then confirmed in respect of those officers who successfully complete the flying training conversion course for pilots, lasting for a period of approximately six months.

(b) Air Force Ground Duties Branch Cadets are granted Permanent Commission (in position) in the rank of Flying Officer, for six months on successful completion of training at AFA. On successful completion of the probationary period of approximately six months, the Permanent Commission is then confirmed.

TERMS AND CONDITIONS OF SERVICES

10. Army Officers and equivalent ranks in Air Force and Navy

(i) Fixed Stipend for Cadet Training:-

Stipend is maintained Cadets during the entire duration of training in Service academies i.e. during training period at IMA.	Rs 36,500/- 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 the first 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.

(ii) Pay

Rank	Pay Level (in Rs.)
Lt to Maj	Lt - Level 10 (126,100 = 1,77,500/-) Capt - Level 10 (130,100 = 1,83,500/-) Maj - Level 11 (199,400 = 2,01,200/-)
Lt Col to Maj Gen	Lt Col - Level 12A (1,21,200 = 2,12,400/-) Col - Level 13 (1,31,600 = 2,35,900/-) Brig - Level 13A (1,39,600 = 2,17,600/-) Maj Gen - Level 14 (1,44,200 = 2,18,300/-)
Lt Gen (BMS) / Sales	Level 15 (1,81,300 = 2,34,100/-)
Lt Gen (BMS) + Sales	Level 16 (2,01,400 = 2,54,400/-)
VCOAS/Army Col/ Lt Gen (NB/SI)	Level 17 (2,21,000 = 3,00,000/-)
COAS	Level 18 (2,50,000 = 3,00,000/-)

(ii) **MP in the office is as follows:-**

Military Service Pay(MSP) to the officers: Rs.19,500 p.m. fixed from the rank of Lt to Gen.	
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(iii) Risk and Hazard allowance has been introduced by the 7th CPC under which an additional amount is added to his entitled allowances to get risk and hazard of the area where he/she is serving.

(iv) **Other allowances:-**

Business Allowance	Allowances at the same rates and under the same conditions as are applicable to the civilian personnel from time to time.
Post Allow.	Rs 13,125/- pm
Post Reserve Allow.	Rs 1,281/- pm
Post Deep Seafaring Allow.	Rs 14,125/- pm
Project Allow.	Rs 4,250/- pm
Special Forum Allow.	Rs 11,250/- pm
Technical Allow.(Tech-D)	Rs 3,000/- pm
Submarine Allow.(Sub-S)	Rs 4,500/- pm

(v) **Uniform Allowance** Rs.29,000/- per year

(vi) **Ration in Kind** As per issue and Field ration

(vii) **Transport Allowance (PTA)**

Pay Level	Higher PTA Cities (Rs. Per month)	Other Places (Rs. Per month)
Officers	Rs. 7290-DAL/Station	Rs. 3645-DAL/Station

(viii) **Children Education Allowance** Rs. 2815/- per month per child for two children surviving only. CEA is admissible from Nursery to 12th Class.

(ix) **Housing Subsidy** Rs. 3416/- per month per child for two children surviving only. Housing Subsidy is admissible from Nursery to 12th Class.

(x) The following monetary benefits are available to the Cadets (Direct/Normal) in the event of invalidism or medical ground discharge of a Cadet (Direct) due to causes attributable to or aggravated by military training.

(D) IN CASE OF DISABILITY

- (i) Monthly Ex-gratia amount of Rs. 4,000/- per month.
- (ii) Ex-gratia disability award of Rs. 16280/- per month shall be payable in addition for 100% of disability during period of disablement subject to pecuniary reduction in case the degree of disablement is less than 100%. No disability award shall be payable in case where the degree of disablement is less than 20%.
- (iii) *Consort Allowance* (CAA) @ Rs 678/- per month for 100% disabled on the recommendation of Invalidating Medical Board (IMB).

(E) IN CASE OF DEATH

- (i) Ex-gratia amount of Rs. 12.5 lakhs to the NOK.
- (ii) Monthly Ex-gratia amount of Rs. 9,000/- per month to the NOK.

Note 1. The Ex-gratia awards to Cadets (Direct + NOK), shall be substituted partly as ex-gratia basic and the same shall not be treated as pension for any purpose.

2. Discharge Relief at applicable rates shall be granted as monthly ex-gratia as well as ex-gratia disability award.

III. (a) Army Group Insurance Fund provides insurance cover of Rs.15 lakh on payment of one time non-refundable premium of Rs. 7,200/- (subject to revision from time to time) by cadets from the date of joining for pre-commission training i.e. for 3 years. If a cadet is released as additional premium of Rs. 1,225/- (subject to revision from time to time) per released term will be paid. For those who are invalidated out by DMB on account of disability and not entitled to any pension will be provided Rs.15 lakh for 100 per cent disability. This will be proportionately reduced to Rs. 3 lakh for 20 per cent. However, for less than 20 percent disability, only an Ex-Gratia Grant of Rs. 50,000/- for first two years of training and Rs. 1 lakh during the third year of training will be paid. Disability due to alcoholism, drug addiction and due to the disease of pre-existing origin will not qualify for disability benefit and Ex-Gratia Grant. In addition, cadets withdrawn on disciplinary grounds, expelled or withdrawn from the Academy voluntarily will also not be eligible for disability benefits and Ex-Gratia. There is no surcharge component under the scheme.

(b) The Lady Guardsmen Cadets during pre commissioning when in receipt of reward are issued for Rs. One Cr. as applicable to officers of the regular Army. Monthly AFIR subscription will be deducted directly by PCDR, O/S, PMS. For those who are invalidated out by Invalidating Medical Board (IMB) on account of disability and not entitled to any pension will be provided Rs. 25 lakh for 100 percent disability. This will be proportionately reduced to Rs. 5 lakh for 20 percent disability. However, for less than 20 percent disability, an ex-gratia grant of Rs. 50,000/- only will be paid. Disability due to alcoholism, drug addiction and due to the disease of pre-existing origin will not qualify for disability benefit and Ex-Gratia Grant. In addition, Lady Guardsmen Cadets withdrawn on disciplinary grounds, expelled

as an undesirable or leaving the Academy voluntarily will not be eligible for disability benefits and life-crates.

13. PROMOTIONAL AVENUES:

S/N.	Army	Navy	Air Force	Minimum Receivable Commissioned Service required for Subordinate Promotion
1	2	3	4	5
50	Lieutenant	Sub Lieutenant	Flying Officer	On Commission
58	Captain	Lieutenant	Flight Lieutenant	12 years
61	Major	Lt. Commander	Squadron Leader	16 years
63	Lieutenant Colonel	Commander	Wing Commander	13 years
64	Colonel (Selection)	Captain (Selection)	Group Captain (Selection)	On Selection
66	Colonel (Time Scale)	Lieutenant (Time Scale)	Group Captain (Time Scale)	25 years
70	Brigadier	Commander	Air Commodore	On Selection
79	Vice-General	Rear Admiral	Air Vice Marshal	On Selection
10	Lieutenant General	Vice Admiral	Air Marshal	On Selection
01	General	Admiral	Air Chief Marshal	On Selection

14. RETIREMENT BENEFITS

Pension, gratuity and casualty pensionary award will be admissible in accordance with the rules in force from time to time.

15. LEAVE

Leave will be admissible in accordance with the rules in force from time to time.
