

**FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES
APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA**

This to certify that Shri / Smt / Kumari _____, son / daughter of _____, of Village / Town _____ in District / Division _____ in the State / Union Territory _____ belongs to the _____ Community which is recognized as a Backward Class under the Government of India, Ministry of Welfare, Resolution No. 12011/68/93-BCC (C), dated 10th September, 1993, published in the Gazette of India, Extraordinary, Part-I. Selection I, dated the 13th September, 1993*. Shri / Smt / Kumari _____ and / or his/her family ordinarily reside(s) in the _____ District / Division of the _____ State/Union Territory. This is also to certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in column 3 of the Schedule to the Government of India. Department of Personnel and Training. O.M No 36012/22/93- Estt. (SCT), dated 8-9-1993*.

**District Magistrate,
Deputy Commissioner, etc**

Dated:

SEAL

* as amended from time to time

Note: The term 'Ordinarily' used here will have the same meaning as in Section 20 of the Representation of the people's Act, 1950

**DECLARATION TO BE FURNISHED BY CANDIDATES SEEKING RESERVATION
AS OBC**

To:

The Dy.General Manager (HR)/ Chief Manager(HR) / Senior Manager (HR)

Sub:- Selection for the post of _____

Respected Sir,

"I _____ son / daughter of
Shri _____ resident of village /Town /
City _____
Dist _____ State _____ hereby declare that I
belong to the _____ community which is recognized as Backward Class
by the Government of India for the purpose of reservation in services as per orders contained
in Department of Personnel & Training Office Memorandum No.36012/22/93-Estt.(SCT) dated
8.9.1993, It is also declared that I do not belong to Persons/sections (creamy layer)
mentioned in column 3 of the Schedule to the above-referred Office Memorandum dated
8.9.1993."

2. I further declare that I have been selected and offered the above said post provisionally
which is reserved for the persons belonging to OBC Non Creamy Layer Category. I know that
my appointment to this post is provisional and is subject to the community certificate being
verified through the proper channels and if the verification reveals that my claim to belong to
Other Backward Class or not to belong to Creamy Layer is false, my services will be terminated
forthwith without assigning any further reasons and without prejudice to such further action as
may be taken under the provisions of the Indian Penal Code for production of false caste
certificate.

Thanking you,

Yours faithfully,

Signature of the candidate

FORM OF CERTIFICATE TO BE PRODUCED BY THE CANDIDATES BELONGING TO SCHEDULED CASTE/SCHEDULED TRIBE

This is to certify that Shri/ Shrimathi*/ Kumari* _____ Son/daughter* of _____ of _____ Village/town* _____ in District/Division* _____ of the State/Union Territory* _____ belongs to the _____ Caste/ Tribe which is recognized as a Scheduled Caste / Scheduled Tribe* under:

- *The Constitution (Scheduled Castes) order 1950
- *The Constitution (Scheduled Tribes) order 1950
- *The Constitution (Scheduled Castes)(Union Territories) order 1950
- *The Constitution (Scheduled Tribes) (Union Territories) order 1951

{As amended by the Scheduled Castes and Scheduled Tribes lists(Modification Order, 1956, the Bombay Reorganization act, 1960, the Punjab Reorganization Act, 1966, the state of Himachal Pradesh Act 1970, the North-Eastern areas (Reorganization) Act, 1971 and the Scheduled Castes and Scheduled Tribes orders (Amendment) Act 1976}

- *The Constitution (Jammu and Kashmir) Scheduled Castes order 1956
- *The Constitution (Andaman and Nicobar Islands) Scheduled Tribes order 1959 as amended by the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act 1976;
- *The Constitution (Dadra and Nagar Haveli) Scheduled Castes order 1962
- *The Constitution (Dadra and Nagar Haveli) Scheduled Tribes order 1962
- *The Constitution (Pondicherry) Scheduled Castes order 1964
- *The Constitution (Scheduled Tribes) (Uttar Pradesh) order 1967
- *The Constitution (Goa, Daman and Diu) Scheduled Castes order 1968
- *The Constitution (Goa, Daman and Diu) Scheduled Tribes order 1968
- *The Constitution (Nagaland) Scheduled Tribes order 1970
- *The Constitution (Sikkim) Scheduled Castes order 1978

2. Shri / Shrimathi/ Kumari* _____ and/or * his/her* family ordinarily reside(s) in village/town* _____ of _____ District/Division* of the state/Union Territory* of _____

Signature _____

Designation _____

(With seal of office)

Place _____

State / Union Territory

Date _____

* Please delete the words, which are not applicable

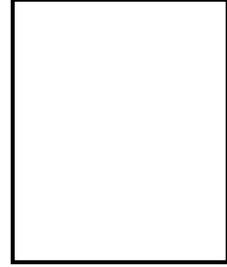
Note : The term " Ordinarily resides" used here will have the same meaning as in section 20 of the Representation of the People Act 1950.

DISABILITY CERTIFICATE

Certificate No.:

Date:

This is to certify that we have carefully examined Shri./ Smt./ Kum. _____
_____ Son / Daughter / Wife
of Shri. _____ Age _____
Registration No. _____ Permanent resident
_____ Ward / Village / Street _____ Post Office _____
District _____ State _____ Whose
photograph is affixed above, and are satisfied that:



A) He / She is a case of _____ Disability.
His / Her extent permanent physical impairment / disability has been evaluated as per
guidelines (to be specified) for the disabilities ticked below and shown against the relevant
disability in the table below:

Sl.No	Disability	Affected part of Body	Diagnosis	Permanent Physical impairment / mental disability(in%)
1	Locomotors Disability	@		
2	Low vision	#		
3	Blindness	Both eyes		
4	Hearing impairment	£		
5	Mental retardation	X		
6	Metal - illness	X		

B) In the light of the above, his / her overall permanent physical impairment as per
guidelines (to be specified), is as follows

In figures: _____ Percent

In words : _____ Percent

2. This condition is progressive / non-progressive / likely to improve / not likely to
improve.

3. Reassessment of Disability is

(i) Not Necessary, Or

(ii) Is recommended / after _____ years _____ months and
therefore this certificate shall be valid till _____ years.

@ e.g. Left / Right / Both arms / Legs

e.g. Single eye / Both eyes

£ e.g. Left / Right / Both ears

4. The applicant has submitted the following documents as proof of residence:

Nature of Document	Date of issue	Details of authority issuing Certificate

Name & Seal of Member

Name & Seal of Member

Name & Seal of the Chairperson