

FORMAT FOR SC/ST CERTIFICATE

A candidate who claims to belong to one of the Scheduled Caste or the Scheduled Tribes should submit in support of his claim an attested/certified copy of a certificate in the form given below, from the District Officer or the Sub-Divisional Officer or any other officer as indicated below of the District in which his parents (or surviving parent) ordinarily reside who has been designated by the State Government concerned as competent to issue such a certificate. If both his parents are dead, the officer signing the certificate should be of the district in which the candidate himself ordinarily resides otherwise than for the purpose of his own education. Wherever photograph is an integral part of the certificate, the Commission would accept only attested photocopies of such certificates and not any other attested or true copy. *(The format of the certificate to be produced by Scheduled Castes and Scheduled Tribes candidates applying for appointment to posts under Government of India)*

This is to certify that Shri/Shrimati/Kumari _____ son/daughter of _____ of village/Town _____ in District/Division _____ of the State/Union Territory _____ belongs to the Caste/Tribe _____ which is recognised as a Scheduled Caste /Scheduled Tribe under.

The Constitution (Scheduled Castes) order 1950 _____

The Constitution (Scheduled Tribe) order 1950. _____

The Constitution (Scheduled Castes) (Union Territory) order 1951* _____ The Constitution (Scheduled Tribe) (Union Territory) order 1951 (As amended by the Scheduled Castes and Scheduled Tribes (Modification) Order 1956 the Bombay Recognised Act 1960 the Punjab Recognition Act 1966 The State of Himachal Pradesh Act 1970 the North Eastern Areas (Reorganisation Act 1971) and the Scheduled Castes and Scheduled Tribes order (Amendment Act 1976).

*The Constitution (Jammu & Kashmir) Scheduled Castes order 1956 _____

*The Constitution (Andaman and Nicobar Islands) Scheduled Tribes 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 Tribe order 1962

*The Constitution (Pondichery) Scheduled Castes order 1964

*The Constitution (Uttar Pradesh) Scheduled Tribe order 1967

*The Constitution (Goa Daman & Diu) Scheduled Castes order 1968

*The Constitution (Goa Daman & Diu) Scheduled Tribe order 1968

*The Constitution (Nagaland) Scheduled Tribes order 1970

*The Constitution (Sikkim) Scheduled Castes order 1978

*The Constitution (Sikkim) Scheduled Tribes order 1978

*The Constitution (Jammu & Kashmir) Scheduled Tribes Order 1989@

*The Constitution (SC) order (Amendment) Act 1990

*The Constitution (ST) order (Amendment) Ordinance 1991

*The Constitution (ST) order (Second Amendment) Act 1991

*The Constitution (ST) Ordinance 1996

% Applicable in the case of Scheduled Castes, Scheduled Tribes persons who have migrated from one State/Union Territory Administration.

This certificate is issued on the basis of the Scheduled Castes/Scheduled Tribes Certificate issued to

Shri/Shrimati _____ Father/mother _____ of Shri/Shrimati/Kumari _____ of village /town _____ District/Division _____ of the State /UT _____ who belongs to the _____ Caste/Tribe which is recognized as a Scheduled Caste/Scheduled Tribe in the State/Union Territory* issued by the _____ dated _____%3. Shri/Shrimati/Kumari _____ and! or* his/her family ordinarily reside(s) in village/town* _____ of _____ District/Division* _____ of the State/Union Territory of _____

Place.....

Signature

Date.....

Designation.....

(With seal of office)

NOTE:- The terms ordinarily reside(s) used here will have the same meaning as in section 20 of the Representation of the people Act 1950

LIST OF AUTHORITIES EMPOWERED TO ISSUE CASTE/TRIBE CERTIFICATE

1. District Magistrate /Additional District Magistrate /Collector /Deputy Commissioner /Additional Deputy Commissioner / Dy.Collector /1st Class Stipendiary Magistrate /Sub Divisional Magistrate Extra Assistant Commissioner /Taluka Magistrate/Executive Magistrate.
2. Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate
3. Revenue Officer not below the rank of Tehsildar
4. Sub-Divisional officer of the area where the candidate and /or his family normally resides

ANNEXURE-B

(FORMAT OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES)

This is to certify that _____ son/daughter of _____ of village _____
_____ District/Division _____ in the
_____ State _____ belongs to the

Community which is recognized as a backward class under :

- i) Resolution No. 12011 /68/93-BCC dated the 10th September, 1993, published in the Gazette of India Extraordinary - Part I, Section I, No. 186 dated 13th September, 1993.
- i i) Resolution No. 12011/9/94-BCC, dated 19.10.1994 published in Gazette of India extraordinary Part I Section I No.163, dated 20th October, 1994.
- iii) Resolution No. 12011 /7/95-BCC dated the 24th May 1995 Published in the Gazette of India extraordinary Part I, Section I No. 88 dated 25th May, 1995.
- iV) Resolution No. 12011/96/94-BCC dated 9th March, 1996.
- v) Resolution No. 12011/44/96-BCC, dated the 6th December, 1996, published in the Gazette of India Extraordinary Part I, Section -1, No. 210, dated the 11th December, 1996.
- vi) Resolution No. 12011/13/96-BCC dated 3rd December, 1997.
- vi) Resolution No. 12011/99/94-BCC dated 11th December, 1997.
- wi) Resolution No. 12011 /68/96-BCC dated 27th October, 1999.
- ix) Resolution No. 12011/88/98-BCC dated 6th December, 1999, published in the Gazette of India, Extra Ordinary Part I, Section I No. 270,6th December, 1999.
- x) Resolution No. 12011736/99-BCC dated 4th April, 2000, published in the Gazette of India, Extra Ordinary Part I, Section I. No. 71 dated 4th April, 2000.
- xi) Resolution No. 12011 /44/99-BCC dated 21.9.2000, published in the Gazette of India, Extra Ordinary Part I, Section I, No. 210 dated 21.9.2000.

Shri _____ and/or him family ordinarily reside(s) in the
_____ District/Division of the _____ State

This it to to certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in column 3 of the Scheduled to the Government of India, Department of Personnel & Training OM No. 36012/22/93-Estt. (SCT) dated 08.09.1993 and modified vide Govt. of India Deptt. of Personnel and Training OM No. 36033/3/2004-Estt. (Res) dated 09.03.2004 & 14.10.2006.

Dated:

Seal:

etc.

District Magistrate or
Deputy Commissioner

Note -

- (a) The term 'Ordinarily' used here will have the same meaning as a Section 20 of the Representation of the People Act, 1950.
- (b) The authorities competent to issue Caste Certificate are indicated below :-
 - (i) District Magistrate/Additional Magistrate/Collector/Dy. Commissioner/Additional Deputy Commissioner / Deputy Collector/1 st Class Stipendiary Magistrate/Sub-Divisional Magistrate/Taluka Magistrate/Executive Magistrate/Extra.Assistant Commissioner (not below the rank of 1st class Stipendiary Magistrate)
 - (ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
(* (ii) Revenue Officer not below the rank of Tehsildar.
 - (iv) Sub-Divisional Officer of the area where the candidate and/or his family resides.

Note:- The closing date for receipt of application will be treated as the date of reckoning for OBC status of the candidate and also, for assuming that the candidate does not fall in the creamy layer.

FORM OF MEDICAL CERTIFICATE FOR PERSONS WITH DISABILITIES (PWD)

NAME & ADDRESS OF THE INSTITUTE/HOSPITAL

DISABILITY CERTIFICATE Date

Certificate No.....

Control No.(for office use
 Paste here recent colour passport size photograph of the SCRIBE of size 4 cm x 5 cm (The colour photograph should not be more than 3 month old)

1. This is certify that Smt./Shri/Kum *.....son/daughter of
 Shri.....ageof
 Male /Female having identification marks as below
is suffering from
 Permanent disability of following category.

A. Loco motor or cerebral palsy :

- (i) BL-Both legs affected but not arms .
- (ii) BA-Both arms affected
- (iii) OL-one leg affected (right or left)
- (iv) OA-One arms(right or left)
- (v) BH-Stiff back and hips (cannot sit or stoop)
- (vi) MW-Muscular weakness and limited physical endurance.
- (a) BA-Both arms affected
- (b) Weakness of grip
- (a) Impaired reach
- (b) Weakness of grip (c) Ataxic
- (a) Impaired reach
- (b) Weakness of grip (c) Ataxic

B. Blindness or Low Vision :

- (i) B-Blind
- (ii) PB-PB-Partially Bind
- (c) Hearing Impairment :
- (i) D-Deaf
- (ii) PD-Partially Deaf

(Delete the category whichever is not applicable)

2. This condition is progressive/non-progressive/likely to improve/not likely to improve. Re-assessment of this case is not recommended/is recommended after a period of yearmonths.

3. Percentage of disability in his/her case is Percent.

4 Smt./Shri./Kum*.....meets the following physical requirement for discharge of his/her duties :

- | | | |
|---|-----|----|
| (i) F-can perform work by manipulating with fingers | Yes | No |
| (ii) PP-can perform work by pulling and pushing | Yes | No |
| (iii) L-can perform work by lifting | Yes | No |
| (iv) KC-can perform work by kneeling and crouching | Yes | No |
| (v) B-can perform work by bending | Yes | No |
| (vi) S-can perform work by sitting | Yes | No |
| (vii) ST-can perform work by standing | Yes | No |
| (viii) W-can perform work by walking | Yes | No |
| (ix) SE-can perform work by seeing | Yes | No |
| (x) H-can perform work by hearing/speaking | Yes | No |
| (xi) RW-can perform work by reading and writing | Yes | No |

(Signature of Doctor)

Name :

Registration No.

Member, Medical Board

*Please delete the words which are not applicable

Place :

Date :

(Signature of Doctor)

Name:

Registration No.

Member, Medical Board

(Signature of Doctor)

Name:

Registration No.

Member/Chairperson, Medical Board

Counter signature of the Medical Superintendent/CMO/

Head of Hospital(with seal)

Note : (i) according to the persons with Disabilities (Equal Opportunities, Protection of Rights and Full participation)Rules,1996 nullified on 31.12.1996 by the Central Government in exercise of the powers conferred by sub-Section(1) and(2) of Section 73 of the Persons with Disabilities(Equal Opportunities, Protection of Rights and Full Participation)Act. 1995 (1 of 1996), authorities to give disability Certificate will be a Medical Board duly constituted by the Central or the State Government. The State Government may constitute a Medical Board consisting of at least three members out of which at least one shall be a specialist in the particular field for assessing locomotor/hearing and speech disability, mental retardation and leprosy cured as the case may be .

(ii) The certificate would be valid for a period of 5 years for those whose disability is temporary. For those who acquired permanent disability, the validity can be shown as permanent.