OBC Undertaking

Declaration/undertaking - for OBC Candidates only

I,son/daughter of Shri								
resident	of	village/town/city			distric	:t		State
		hereby	declare	that	I	belong	to	the
				commun	nity which	is recognised as	s a backwa	ard class

by the Government of India for the purpose of reservation in services as per orders contained in Department of Personnel and 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, which is modified vide Department of Personnel and Training Office Memorandum No.36033/3/2004 Estt.(Res.) dated 9/3/2004.I also declare that the condition of status/annual income for creamy layer of my parents/guardian is within prescribed limits as on financial year ending on March 31, 2021.

Place:

Signature of the Candidate*

Date:

*Declaration/ Undertaking not signed by Candidate will be rejected

FORM-GEN-EWS

INCOME & ASSET CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Certificate No.

Date:

whose photograph is attested below belongs to Economically Weaker Sections, since the gross annual income* of his/her **"family"**** is below Rs. 8 lakh (Rupees Eight Lakh only) for the financial year 2020-2021. His/her family does not own or possess any of the following assets***:

- I. 5 acres of agricultural land and above;
- II. Residential flat of 1000 sq. ft. and above;
- III. Residential plot of 100 sq. yards and above in notified municipalities;
- IV. Residential plot of 200 sq. yards and above in areas other than the notified municipalities.

2. Shri/Smt./Kumari ______ belongs to the _____ caste which is not recognized as a Schedule Caste, Schedule Tribe and Other Backward Classes (Central List).

Signature with seal of Officer

Name _____ Designation

Recent Passport size attested photograph of the applicant

The income and assets of the families as mentioned would be required to be certified by an officer not below the rank of Tehsildar in the States/UTs.

* Note1: Income covered all sources i.e. salary, agricultural, business, profession, etc.

- **** Note2:** The term **"Family"** for this purpose includes the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years.
- ***** Note3:** The property(ies) held by a **"Family"** in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

FORM-OBC-NCL

OBC-NCL Certificate Format

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES (NCL)* APPLYING FOR ADMISSION TO CENTRAL EDUCATIONAL INSTITUTIONS (CEIs), UNDER THE GOVERNMENT OF INDIA

This is to certify that Shri/Smt./Kum*	* Son/
Daughter** of Shri/Smt.**	of Village/
Town**	District/Division** in the
State/Union Territory	belongs to the
co	mmunity that is recognized as a backward class under
· ,	ial Justice and Empowerment's Resolution No. ted****
Shri/Smt./Kum	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 (C	reamy Layer) mentioned in Column 3 of the Schedule
to the Government of India, Department of	f Personnel & Training O.M. No. 36012/22/93- Estt.
(SCT) dated 08/09/93 which is modifie	d vide OM No. 36033/3/2004 Estt.(Res.) dated
09/03/2004, further modified vide OM No	36033/3/2004-Estt. (Res.) dated 14/10/2008, again
further modified vide OM No.36036/2/2013-	Estt (Res) dtd. 30/05/2014, and again further modified
vide OM No. 36033/1/2013-Estt (Res) dtd. 13	/09/2017.

District Magistrate / Deputy Commissioner / Any other Competent Authority

Dated:

Sea	
*	Visit http://www.ncbc.nic.in for latest guidelines and updates on the Central List of State-wise OBCs.
**	Please delete the word(s) which are not applicable

- ** Please delete the word(s) which are not applicable. *** As listed in the Annexure (for FORM-OBC-NCL)
- **** The authority issuing the certificate needs to mention the details of Resolution of Government of India, in which the caste of the candidate is mentioned as OBC.
- NOTE:
- (a) The term 'Ordinarily resides' used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.
- (b) The authorities competent to issue Caste Certificates are indicated below:
 - (i) District Magistrate/ Additional Magistrate/ Collector/ Deputy Commissioner/ Additional Deputy Commissioner/ Deputy Collector/ Ist Class Stipendiary Magistrate/ Sub-Divisional magistrate/ Taluka Magistrate/ Executive Magistrate/ Extra Assistant Commissioner (not below the rank of Ist Class Stipendiary Magistrate).
 - (ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
 - (iii) Revenue Officer not below the rank of Tehsildar' and
 - (iv) Sub-Divisional Officer of the area where the candidate and/or his family resides

ANNEXURE for FORM-OBC-NCL

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SI. No.	Resolution No.	Date of Notification
1	No.12011/68/93-BCC(C)	13.09.1993
2	No.12011/9/94-BCC	19.10.1994
3	No.12011/7/95-BCC	24.05.1995
4	No.12011/96/94-BCC	09.03.1996
5	No.12011/44/96-BCC	11.12.1996
6	No.12011/13/97-BCC	03.12.1997
7	No.12011/99/94-BCC	11.12.1997
8	No.12011/68/98-BCC	27.10.1999
9	No.12011/88/98-BCC	06.12.1999
10	No.12011/36/99-BCC	04.04.2000
11	No.12011/44/99-BCC	21.09.2000
12	No.12015/9/2000-BCC	06.09.2001
13	No.12011/1/2001-BCC	19.06.2003
14	No.12011/4/2002-BCC	13.01.2004
15	No.12011/9/2004-BCC	16.01.2006
16	No.12011/14/2004-BCC	12.03.2007
17	No.12011/16/2007-BCC	12.10.2007
18	No.12019/6/2005-BCC	30.07.2010
19	No. 12015/2/2007-BCC	18.08.2010
20	No.12015/15/2008-BCC	16.06.2011
21	No.12015/13/2010-BC-II	08.12.2011
22	No.12015/5/2011-BC-II	17.02.2014
·		L

son/daughter*

SC/ST Certificate Format

FORM OF CERTIFICATE TO BE PRODUCED BY SCHEDULED CASTES (SC) AND SCHEDULED **TRIBES (ST) CANDIDATES**

1. This is to certify that Shri/ Shrimati/ Kumari*

of State/Union Territory* b	belongs	4.	
	0	το	the
Scheduled Caste / Scheduled Tribe* under :-			
* The Constitution (Scheduled Castes) Order, 1950 * The Constitution (Scheduled Tribes) Order, 1950			
* The Constitution (Scheduled Castes) (Union Territories) Order, 1951 * The Constitution (Scheduled Tribes) (Union Territories) Order, 1951			
[As amended by the Scheduled Castes and Scheduled Tribes Lists (Modification Order) 1956, the Bombay Reorganisation Act, 1960, the Punjab F 1966, the State of Himachal Pradesh Act, 1970, the North Eastem Areas (Reorganisation) Act, 1971, the Scheduled Castes and Scheduled Tribes (Amendment) Act, 1976 and the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 2002]		ition A	ct,
* 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 Act, 1976;	oes Order (Ame	ıdment)
* The Constitution (Dadara and Nagar Haveli) Scheduled Castes Order, 1962;			
* The Constitution (Dadara and Nagar Haveli) Scheduled Tribes Order, 1962;			
* The Constitution (Pondicherry) Scheduled Castes Order, 1964;			
* The Constitution (Uttar Pradesh) Scheduled Tribes Order, 1967;			
* The Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968;			
* The Constitution (Goa, Daman and Diu) Scheduled Tribes Order, 1968; * The Constitution (Negeland) Scheduled Tribes Order, 1970;			
 * The Constitution (Nagaland) Scheduled Tribes Order, 1970; * The Constitution (Sikkim) Scheduled Castes Order, 1978; 			
* The Constitution (Sikkim) Scheduled Tribes Order, 1978;			
* The Constitution (Jammu and Kashmir) Scheduled Tribes Order, 1989;			
* The Constitution (Scheduled Castes) Order (Amendment) Act, 1990;			
* The Constitution (Scheduled Tribes) Order (Amendment) Act, 1990;			
* The Constitution (Scheduled Tribes) Order (Second Amendment) Act, 1991.			
2. * This certificate is issued on the basis of the Scheduled Castes / Scheduled Tribes* Certificate issued to			
father/mother* of Shri /Shrimati /Kumari*			
in District/Division* of the			
Territory* who belongs to the Caste / Tribe* which is recognised as a S	Schedule	d Ca	iste /
Scheduled Tribe* in the State / Union Territory*issued by thei		(lated
3. Shri/ Shrimati/ Kumari *and / or* his / her* family ordinarily reside(s)*			
ofDistrict/Division* of the State Union Territory* of			<u> </u>
Signature:			
Designation			
(With	n seal of t	the C	(ffice)
Place: State/Union Territory*			
Date:			
* Please delete the word(s) which are not applicable.			

Applicable in the case of SC/ST Persons who have migrated from another State/UT.

IMPORTANT NOTES

The term "ordinarily reside(s)**" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950. Officers competent to issue Caste/Tribe certificates:

- 1. District Magistrate / Additional District Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / Ist Class Stipendiary Magistrate / City Magistrate / Sub-Divisional Magistrate / Taluka Magistrate / Extra Assistant Commissioner. Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
- 2.
- Revenue Officers not below the rank of Tehsildar. 3.
- 4. Sub-divisional Officer of the area where the candidate and/ or his family normally reside(s).
- Administrator / Secretary to Administrator / Development Officer (Lakshadweep Island). 5.
- Certificate issued by any other authority will be rejected. 6.

CERTIFICATE OF MEDICAL FITNESS

[To be obtained only from Gazetted Government Medical Officer / Medical Officer of a Government Undertaking. (Please note that Medical Certificate issued by Private Practitioners will not be accepted)]

Name (In Block Letters)	
Parent / Guardian Name	
Sex Male / Female	Blood Group (Optional)
Heightcm	Weightkg
Chest: Expcm	Inspcm
Heart	Lungs
Vision	Hearing
Hernia / Hydrocele / Varicocele/Piles, et	c:
·	st:
Personal Marks of Identification:	
1. 2.	
I do hereby certify that I have examined	Sri/Kum/Smt,
A candidatefor	and whose signature is given below
and that I could not notice that he/she	has any disease, constitutional affection, bodily infirmity or
mental unsoundness.His/Her age accord	ling to his/her statement is

year and by appearance about years.

Signature of the Candidate

Place	Signature: of the Medical Officer
Date	Name:
Office Seal	Designation:
	Registration No.