

PROFORMA FOR CASTE CERTIFICATE FOR SC/ST CANDIDATES

The candidates are required to obtain caste certificates in the proper proforma from the competent authority and produce the original certificate at the time of verification failing which he/she may be disqualified. This is strictly required vide chapter 13 of the Brochure (Published by Govt. of India, Ministry of Personnel, Public Grievances & Pensions Department of Personal Training, New Delhi) As a large number of candidates are producing certificates issued by authority different from the competent authority they are advised to comply with the instructions.

FORM OF CASTE CERTIFICATES

(Form of certificate to be produced by a candidate belonging to Scheduled Castes or Scheduled Tribes in support of Claim)

This is to certify that Shri/Smt./Kum* _____ Son/Daughter* of _____ Of village/town* _____ District/Division* _____ Of State/Union Territory* _____ belongs to the _____ Caste/Tribe* which is recognized as a Scheduled Caste/Scheduled Tribe* under:

- The Constitution (Scheduled Caste) order, 1950
- The Constitution (Scheduled Tribes) order, 1950
- The Constitution (Scheduled Caste) (Union Territories) order, 1951
- The Constitution (Scheduled Tribes) (Union Territories) order, 1951(as amended by the Scheduled Caste and Scheduled Tribes Lists Modification), Order, 1956 the Bombay Reorganisation Act 1960, the Punjab Reorganisation Act, 1966, the State of Himachal Pradesh Act, 1970, the North Eastern Areas Re-organisation Act, 1971, and the Scheduled Tribes Order (Amendment) Act, 1976.
- The Constitution (Jammu and Kashmir) Scheduled Caste Order, 1956.
- The constitution (Jammu and Kashmir) Scheduled Tribe Order 1956
- The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959.
- 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 Caste Order, 1978
- The Constitution (Sikkim) Scheduled Tribes Order, 1978

2. Application in the case of Scheduled Castes/Scheduled Tribes Persons who have migrated from One State/Union Territory.

This certificate is issued on the basis of Scheduled Castes/Scheduled Tribes Certificates issued to that Shri /Smt.Kum* _____ Father/Mother of Shri/Smt./Kum _____ in District/Division* _____ of State/Union Territory _____ who belongs to the _____ Caste/Tribe* which is recognized as a Scheduled Caste/Scheduled Tribes* in State/Union Territory* _____ issued by the _____ (Name of prescribed authority) vide their No. _____ dated _____ .

3. Shri/Smt/Kum.* _____ and of his/her* family ordinarily reside(s) in village/town* _____ of _____ District/Division of State/Union Territory of _____ Place _____ State/Union Territory

Signature _____ date _____ Designation (with seal of office) _____

(* Please delete the words which are not applicable) (* Please quote specific presidential order) (* Delete the Paragraph which is not applicable)

Note: The term * Ordinarily resides* used will have the same meaning as in Section 30 of the Representation of the Peoples Act, 1950.

- List of Authorities employed to issue certificates of verification
1. District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Deputy Collector Ist Class Stipendiary Magistrate/City Magistrate/Sub Divisional Magistrate/Taluka Magistrate/Executive Magistrate/Extra Assistant Commissioner, (Not below the rank of Ist Class Stipendiary Magistrate)
 2. Chief Presidency Magistrate/additional Chief Presidency Magistrate/Presidency Magistrate. 3. Revenues Officers not below the rank of Tehsildar.
 4. Sub Divisional Officer of the area where the candidate and /or his family Ordinarily resides.
 5. Administrative Secretary in Administrator/ Development Officer (Lakshadweep Islands).

Form OF Certificate to be produced by other Backward Classes applying for Appointment to Post under the Government of India.

This is to certify that ----- Son/Daughter of ----- of village-----
-----district/division ----- in ----- state belongs to -----
-----community, which is recognized as a Backward Class under.

1. Resolution No. 12011/68/93 -BCC© dated the 10th September 1993, published in t he Gazette of India - extraordinary -part 1, Section 1, No. 186 dated the 13th September 1993.
2. Resolution No. 12011/9//94 -BCC, dated 19th –October 1994, published in the Gazette of India - Extraordinary - part 1, Section 1, No. 163, dated the 20th October 1994.
3. Resolution No. 12011/7/95 -BCC, dated 24th May 1995 published in Gazette of India -extraordinary -part1, section1, 88, dated the 25th May 1995.
4. Resolution No. 12011/44/96 -BCC, dated the 6th December 1996 published in Gazette of India - extraordinary – part 1, section 1, No. 210, dated the 11th December 1996.
5. Resolution No. 12011/68/93 -BCC, published in Gazette of India -extraordinary - NO 129, dated the 8th July 1997.
6. Resolution No. 12011/12/96 -BCC, published in Gazette of India -extraordinary – No. 164, dated the 1st September 1997.
7. Resolution No. 12011/99/94 -BCC, published in Gazette of India -extraordinary – No. 263, dated the 11th December 1997.
8. Resolution No. 12011/13/97 -BCC, published in Gazette of India -extraordinary – No.239, dated the 3rd December 1997.
9. Resolution No. 12011/12/96 -BCC, published in Gazette of India -extraordinary – No. 166, dated the 3rd August 1998.
10. Resolution No. 12011/68/93 -BCC, published in Gazette of India -extraordinary – No. 171, dated the 6th August 1998.
11. Resolution No. 12011/68/98 -BCC, published in Gazette of India -extraordinary – No. 241, dated the 27th October 1999.
12. Resolution No. 12011/88/98 -BCC, published in Gazette of India -extraordinary – No. 270, dated the 6th December 1999.
13. Resolution No. 12011/36/99 -BCC, published in Gazette of India -extraordinary – No. 71, dated the 4th April 2000.

Shri----- and/or his family ordinarily reside(s) in the -----
-----District/Division of the ----- State.

This is also to certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in column 3 of the schedule of the Government of India. Department of Personnel & Training O.M. No. 36012/22/93 Estt. (SCT) dated 08.09.93.

Dated District Magistrate/ Seal Deputy Commissioner etc.

NB: (a) The term Ordinarily used here will ha ve the same meaning as in 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/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector/Ist Class Stipendiary Magistrate/Sub - Divisional Magistrate/Taluka Magistrate/Executive Magi strate/Extra Asstt.

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 Di visional Officer of the area where the candidate and/or his family resides.

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 candidate 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

(Signature of Doctor)

Name:

Registration No.

Member, Medical Board

(Signature of Doctor)

Name:

Registration No.

Member/Chairperson, Medical Board

*Please delete the words which are not applicable

Place :

Date :

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.

RAILWAY RECRUITMENT CELL

INCOME CERTIFICATE FOR WAIVER OFF EXAMINATION FEES FOR RRC EXAMINATION

1. Name of Candidate :
2. Father's/Husband's Name :
3. Age :
4. Residential Address :
5. Annual Family Income :
(In words & figures)
6. Date of issue :
7. Signature :
8. Stamp of issuing authority :

(Name)

NB : Economically Backward Classes will mean the candidates whose family income is less than Rs.50,000/- per annum. The following authorities are authorized to issue income certificate for the purpose of identifying economically backward classes.

(i) District magistrate or any other Revenue Officer upto the level of Tehsilder (ii) Sitting Member Of Parliament of Lok Sabha for persons of their own constituency (iii) BPL Card or any other Certificate Issued be Central Government under a recognized poverty alleviation programme or Izzat MST issue of Railways (v) Union Minister may also recommend to Dy.CPO/RRCs for any persons from anywhere in the country. (vi) Sitting Member Of Parliament of Rajya Sabha for persons of the district in which these MPS normally reside.

Proforma for declaration to be submitted by Other Backward Class Candidates alongwith the application while applying for the posts against Employment Notice No. _____ of RRC _____

DECLARATION

"I, _____ son/daughter of Shri _____ resident of Village _____ town/city _____ district _____ state _____ hereby declare that I belong to the _____ (indicate your sub - caste) community which is recognized as a backward 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 -(SCT) dated 08.09.1993. 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 08.09.1993 and its subsequent through O.M. No. 36033/3/2004 -Estt. (Res.) dated 09.03.2004."

Place :

Signature of the candidate

Date :

Name of the candidate