

**ICMR-National Institute for Implementation Research on Non-Communicable Diseases,  
Jodhpur**

New Pali Road, Jodhpur-342005

Advertisement No. NIIRNCD/Tech/01/2023

Date: 02.08.2023

**VACANCY NOTIFICATION**

Applications are invited for the following regular posts: -

Sl. No	Name of the post	Total No. of Posts*	Reservation						Pay Level (as per 7th CPC)	
			Vertical					Horizontal		
			UR	SC	ST	OBC	EWS	PwBD	ESM	
1	Technical Assistant	02	01	00	00	01	00	00	00	Pay Level-6 (Rs. 35,400 - 1,12,400)
2	Technician - 1	05	03	00	00	02	00	00	00	Pay Level-2 (Rs 19,900 – 63,200)
3	Laboratory Attendant -1	08	06	00	00	02	00	01	00	Pay Level-1 (Rs. 18,000 – 56,900)
TOTAL		15	10	00	00	05	00	01	00	

\*Vacancies shown are tentative and may increase/decrease at any stage of recruitment.

The last date of submission of application forms is **31.08.2023 up to 11:59 PM**. The applications should be submitted online (Link: <https://recruitment.rajasthan.gov.in/>).

Corrigendum, if any, shall be published on the Institute's website (<https://niirncd.icmr.org.in/>) only.

**Director In-Charge**

ICMR-National Institute for Implementation Research on Non-Communicable  
Diseases, Jodhpur  
New Pali Road, Jodhpur-342005

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Advertisement No. NIIRNCD/Tech/01/2023

Date: 02.08.2023

**VACANCY NOTIFICATION**

ICMR-National Institute for Implementation Research on Non-Communicable Diseases is one of the prestigious research organizations working under the aegis of Indian Council of Medical Research, Department of Health Research, Ministry of Health and Family Welfare, Govt. of India.

ICMR-NIIRNCD intends to fill up various positions under the Technical Cadre. Online applications are invited up to **31.08.2023 up to 11:59 PM** for the following regular technical cadre posts:

Sl. No	Details of Posts to be filled	
1	Post Code	TA (Anthropology)
2	Name of the post	Technical Assistant (Anthropology)
3	Pay Level	Pay Level - 6 (Rs. 35,400 - 1,12,400)
4	Posts	01 (UR)
5	Essential Qualification	1 <sup>st</sup> class Bachelor's Degree (minimum three years' duration) with Anthropology from a Govt. recognized University)
6	Upper Age Limit	30 years

Sl. No	Details of Posts to be filled	
1	Post Code	TA (CS)
2	Name of the post	Technical Assistant (Computer Science Engineering/ Information Technology)
3	Pay Level	Pay Level - 6 (Rs. 35,400 - 1,12,400)
4	Posts	01 (OBC)
5	Essential Qualifications	1 <sup>st</sup> class three years' Engineering Diploma in Computer Science Engineering/ Information Technology from a Govt. recognized Institute with two years' experience in computer works in a Government recognized / approved / registered Institution. OR 1 <sup>st</sup> class B.E. / B.Tech in Computer Science Engineering / Information Technology
6	Upper Age Limit	30 years

Sl. No	Details of Posts to be filled	
1	Post Code	TECH (Electrical)
2	Name of the post	Technician - 1 (Electrical)
3	Pay Level	Pay Level -2 (Rs. 19,900 - 63,200)
4	Posts	01 (UR)
5	Essential Qualification	12 <sup>th</sup> or intermediate pass in science subjects with 55% marks from a Govt. recognized Board. AND At least one-year Diploma in Electrical from a government recognized institution.
6	Upper Age Limit	28 Years

Sl. No	Details of Posts to be filled	
1	Post Code	TECH (CS/IT)
2	Name of the post	Technician - 1 (Computer Science/Information Technology)
3	Pay Level	Pay Level -2 (Rs. 19,900 - 63,200)
4	Posts	02 (UR-01, OBC-01)
5	Essential Qualification	12 <sup>th</sup> or intermediate pass in science subjects with 55% marks from a Govt. recognized Board. AND At least one-year Diploma in Computer from a government recognized institution.
6	Upper Age Limit	28 Years

Sl. No	Details of Posts to be filled	
1	Post Code	TECH (MLT)
2	Name of the post	Technician - 1 ( MLT )
3	Pay Level	Pay Level -2 (Rs. 19,900 - 63,200)
4	Posts	02 (UR-01, OBC-01)
5	Essential Qualification	12 <sup>th</sup> or intermediate pass in science subjects with 55% marks from a Govt. recognized Board. AND At least one-year Diploma in Medical Laboratory from a government recognized institution.
6	Upper Age Limit	28 Years

Sl. No	Details of Posts to be filled	
1	Post Code	LA
2	Name of the post	Laboratory Attendant - 1
3	Pay Level	Pay Level-1 (Rs. 18,000 - 56,900)
4	Posts	01 (UR (PwBD) -01)
5	Essential Qualification	10 <sup>th</sup> Pass with 50% marks in aggregate from a Govt. recognized board AND One year working experience in a Govt. recognized/approved/registered Laboratory.
6	Age Limit	Between 18 and 25 Years

Sl. No	Details of Posts to be filled	
1	Post Code	LA (Electrical)
2	Name of the post	Laboratory Attendant – 1 (Electrical)
3	Pay Level	Pay Level-1 (Rs. 18,000 - 56,900)
4	Posts	02 (UR-01, OBC-01)
5	Essential Qualification	10 <sup>th</sup> Pass with 50% marks in aggregate from a Govt. recognized board AND ITI in Electrical or trade certificate in Electrical issued by govt agencies.
6	Age Limit	Between 18 and 25 Years

Sl. No	Details of Posts to be filled	
1	Post Code	LA (Horticulture)
2	Name of the post	Laboratory Attendant – 1 (Horticulture)
3	Pay Level	Pay Level-1 (Rs. 18,000 - 56,900)
4	Posts	01 (UR)
5	Essential Qualification	10 <sup>th</sup> Pass with 50% marks in aggregate from a Govt. recognized board AND ITI in Horticulture or trade certificate in Horticulture issued by govt agencies.
6	Age Limit	Between 18 and 25 Years

Sl. No	Details of Posts to be filled	
1	Post Code	LA (Refrigerator & Air Conditioning Technician)
2	Name of the post	Laboratory Attendant – 1 (Refrigerator & Air Conditioning Technician)
3	Pay Level	Pay Level-1 (Rs. 18,000 - 56,900)
4	Posts	01 (UR-01)
5	Essential Qualification	10 <sup>th</sup> Pass with 50% marks in aggregate from a Govt. recognized board AND ITI in Refrigeration & Air Conditioning or trade certificate in Refrigeration & Air Conditioning issued by govt agencies.
6	Age Limit	Between 18 and 25 Years

Sl. No	Details of Posts to be filled	
1	Post Code	LA (Plumber)
2	Name of the post	Laboratory Attendant – 1 (Plumber)
3	Pay Level	Pay Level-1 (Rs. 18,000 - 56,900)
4	Posts	02 (UR-01, OBC-01)
5	Essential Qualification	10 <sup>th</sup> Pass with 50% marks in aggregate from a Govt. recognized board AND ITI in Plumbing or trade certificate in Plumbing issued by govt agencies.
6	Age Limit	Between 18 and 25 Years

Sl. No	Details of Posts to be filled	
1	Post Code	LA (Office Assistant cum Computer Operator)
2	Name of the post	Laboratory Attendant – 1 (Office Assistant cum Computer Operator)
3	Pay Level	Pay Level-1 (Rs. 18,000 - 56,900)
4	Posts	01 (UR)
5	Essential Qualification	10 <sup>th</sup> Pass with 50% marks in aggregate from a Govt. recognized board AND ITI in Office Assistant cum computer Operator/COPA or trade certificate in Office Assistant cum computer Operator/COPA issued by govt agencies.
6	Age Limit	Between 18 and 25 Years

## **HOW TO APPLY: -**

- A. The candidates wish to apply for the posts of Technical Assistant, Technician-1 and Laboratory Attendant-1 should submit online application.

Link <https://recruitment.rajasthan.gov.in/>

## **SELECTION PROCEDURE: -**

1. Selection for the posts of Technical Assistant and Laboratory Attendant – I will be through Computer Based Test (CBT).
2. CBT (Computer Based Test) will be conducted for 100 marks.
3. 95 percent weightage will be given to the marks scored by the candidate in the CBT (Computer Based Test), and 5 percent weightage will be given for research/Lab/respective area experience in any Government recognized/approved/registered Institution or Organization obtained after meeting the Essential Qualification as prescribed in the recruitment rule/advertisement.
4. The 5 percent weightage for Post Essential Qualification research/Lab/ respective area experience in any Government recognized/approved/registered Institution or Organization will be added to the marks scored by the candidate in the CBT as mentioned below:

<b>Relevant Experience</b>	<b>Weightage (marks)</b>
>1 and upto 2 years	1
>2 and <4 years	2
>4 and <6 years	3
>6 and <8 years	4
= 8 years	5

5. Candidates will be finally selected based on marks secured in the CBT and weightage marks for experience in order of the merit as DoPT guidelines and subject to fulfilling all the eligibility criteria.
6. The syllabus and marking for the written examination are given in **Annexure-III**.

## **OTHER TERMS AND CONDITIONS FOR ALL THE POSTS AS MENTIONED ABOVE:**

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### **(A). Fee:-**

1. General/OBC/EWS Candidates: - Rs.300/- (Rupees Three Hundred only).
2. SC/ST/PwBD/Women Candidates are exempted from this payment.
3. The candidate will be required to pay prescribed application fees, if any through Online Mode Only. Transaction/ Processing fee, if any, as applicable will be payable to the bank by the candidate.
4. Application fee once remitted shall not be refunded under any circumstances.
5. Applications without the prescribed fee would not be considered and summarily rejected.

### **(B). AGE LIMIT: -**

1. The crucial date for determining the age limit shall be the last date of receipt of applications i.e. 31.08.2023 for all the posts.
2. No age relaxation will be given to SC/ST/OBC (Non Creamy Layer) candidates applying for the Unreserved posts as per Govt. of India order No.36011/1/98/Estt(Res.) dated 01.07.1998 as amended from time to time.
3. The age relaxation to SC/ST/OBC/ (None Creamy Layer) /PwBD/Ex-Servicemen etc. shall be considered as per the DoPT OM No. DoPT-1667569393892 dated: 06.09.2022 as amended time to time.
4. Relaxation of age limit would be permissible to such persons who have a minimum of 40% disability. The candidates need to attach the relevant Disability Certificate, issued by the competent medical authority of the Govt. of India; for claiming age relaxation failing which no age relaxation shall be considered.
5. Candidates working in the **ICMR FUNDED PROJECTS** continuously shall also be eligible for age relaxation up to five years or equivalent to the project service rendered by them, whichever is less; **provided he/she has entered into the project service within the prescribed age limit for the post for which they are applying.** The tenure of such candidates in the projects should be in continuation and there should be no gap in different tenures. In case of gap between two project service, the tenure of the first service shall be taken into account for consideration of the age relaxation. **The candidates who had worked in the ICMR FUNDED PROJECTS far back and not presently working, shall not be considered for any age relaxation.**
6. Central Govt. servants and departmental candidates who have rendered at least three years continuous service under the Central Government are allowed the age relaxation up to the age of 40 years (45 years for SC/ST) for appointment to Group ‘C’ posts by direct recruitment subject to the usual condition that the Group ‘C’ posts to which direct recruitment is being made are in the same line or allied cadres and that a relationship could be established that service rendered in the post will be useful for efficient discharge of the duties in other categories of posts.

7. Age concession of 5 years are allowed to Departmental Candidates and Central Government employees for appointment to Group 'B' posts by direct recruitment subject to the usual condition that the Group 'B' posts to which direct recruitment is being made are in the same line or allied cadres and that a relationship could be established that service rendered in the post will be useful for efficient discharge of the duties in other categories of posts.
8. The Central Government Servants/Departmental Candidates should submit No Objection Certificate in the prescribed format given in **Annexure-IV**. The other candidates who are working in the ICMR Funded Projects should submit No Objection Certificate in the prescribed format given in the **Annexure-V**.

(C). **TA/DA**: - No TA/DA will be paid to attend the Written Test and the candidates will have to make their own arrangement.

(D). **PROBATION**:-

- (i). The period of Probation will be TWO years for all the posts from date of joining.
- (ii). Other terms and conditions regarding Probation will be as per the rules of ICMR/GOI issued from time to time.

(E). **HORIZONTAL RESERVATION FOR PwBD** : - The Horizontal Resrvation for PwBD shall be as under :-

Sl. No.	Name of the post	Posts reserved for PwBD	Category of Reservation *
1	Laboratory Attendant -1	1 Post	(a)

\*The description of category of reservation is given as under: -

(a)	Blindness and Low Vision
(b)	Deaf and hard of hearing
(c)	Loco-motor disability including cerebral palsy, leprosy cured, dwarfism, acid attack victims and muscular dystrophy
(d)	Autism, intellectual disability, specific learning disability and mental illness
(e)	Multiple disabilities from amongst persons under clauses (a) to (d) including deaf-blindness

(F). **OTHERS**:-

1. Date, time and venue of the written test will be communicated to the shortlisted candidates through call letters/admit cards and no enquiry/request in this regard will

be entertained. Candidates are advised to visit ICMR and NIIRNCD websites from time-to-time for the updated status of the recruitment process.

2. **All the posts carry all India transfer liability. The selected candidates may be posted at any of the Institute/Centre under the control of ICMR and at any Field Units of the NIIRNCD; located in different parts of the Country. The selected candidates may be asked to report at any of the Institute/Centre of the ICMR or any of the Field Unit of NIIRNCD. No TA/DA shall be considered in this case.**
3. Any canvassing by or on behalf of the candidates or to bring political or other outside influence with regard to the selection / recruitment shall be treated as disqualification.
4. The candidates working in the Central/State Govt. Departments / Public Sector Undertakings etc. should submit "**No Objection Certificate**" and "**Vigilance Clearance Certificate**". Advance copies of application will be NOT BE CONSIDERED.
5. The Experience Certificate (Work Experience) should be issued by the competent authority of the Government recognized/approved/registered Laboratory/Institution etc. and must be clear with Name, Designation, salary/pay scale drawn, period of work experience (From – to), nature of duties performed etc. by the candidate.
6. The candidates working in the Central Government only shall be considered for the age relaxation.
7. Educational Qualifications should be from a Recognized Board/Organization/Institute of repute and experience should be in a Govt. recognized/approved/registered laboratory/institution.
8. Only the **POST QUALIFICATION EXPERIENCE** shall be taken into consideration.
9. No person (a) who has entered into, or contracted a marriage with a person having a spouse living, or (b) who, having a spouse living has entered into, or contracted a marriage with any person shall be eligible for appointment to the service provided that the Central Government may, if satisfied that such marriage is permissible under the personal law applicable to such person and the other party to the marriage and there are other grounds for so doing, exempt any person from the operation of this rule.
10. **Separate online Application Form should be filled for each post. Single application for multiple posts will not be allowed.**
11. Those Ex-Servicemen who have already secured regular employment under the Central/State Government in Civil Posts after availing the benefit of ex-servicemen quota would be permitted the benefit of age relaxation as admissible for ex-servicemen for securing another employment in any higher post or service under the Central/State Government irrespective of any Group/Post. However, such candidates will not be eligible for the benefit of reservation, if any, for ex-servicemen in Central Government.
12. OBC certificate for the purpose of age relaxation will mean "**PERSONS OF OBC CATEGORY NOT BELONGING TO CREAMY LAYER**" as defined in DoPT's OM

No. 36012/22/93-Estt (SCT) dated 08.09.1993, modified vide OM No. 36033/3/2004-Estt (Res) dated 09.03.2004 and 14.10.2008 and subsequently revised vide OM No. 36035/1/2013-Estt.(Res.) dated 27.05.2013. 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 on the reckoning date. OBC candidates must, therefore, furnish valid and updated OBC certificate **in the prescribed format given in Annexure-VII** which should specifically include the clause regarding “Exclusion from the Creamy Layer”. Non-Submission of such certificate shall be treated as disqualification. **In order to get age relaxation, they have to furnish a declaration in the prescribed format given in Annexure - VI.**

13. The OBC certificate shall not be more than three years old from the last date of receipt of applications i.e. 31.08.2023.
14. The candidates belonging the SC/ST should submit the caste certificate in the prescribed format (**Annexure – VIII**).
15. The candidates belonging to the PwBD category should submit the Disability Certificate in the prescribed format, as applicable to them (**Annexure – IX**).
16. The applications applying in response to this advertisement, in their own interest, are advised that they should satisfy themselves regarding their eligibility for the post applied for. They must ensure that they fulfill all the eligibility criteria viz. age limit, essential qualifications, experience, reservation etc. as on the last date of receipt of applications i.e. 31.08.2023. In case, at any stage of recruitment or even after appointment, it has come to the notice that any of candidates does not fulfill the required qualifications in respect of the above mentioned eligibility criteria or has furnished any wrong or false or misleading information in the application form or has suppresses any material fact(s) or is not eligible otherwise, his/her candidature will automatically stand cancelled without assigning any reason or notice thereof irrespective of his/her marks obtained in the written test and no enquiry/request/correspondence will be entertained in this regard.
17. The Director, NIIRNCD reserves the right to: -
  - (a) Merely fulfilling the essential qualification and requisite experience by the candidate does not confer any right to be called for the written test.
  - (b) **Increase/decrease/delete the number of vacancies in any category and at any stage of selection process.**
  - (c) Fill up or not to fill up any/all of the advertised positions without assigning any reasons thereof.
  - (d) Rectify any inadvertent error or omission in the advertisement, at any stage of the recruitment Process by notifying it on the ICMR/NIIRNCD website.

18. Applicants, in their own interest are advised to remain in touch with the websites of ICMR and NIIRNCD i.e. [www.icmr.nic.in](http://www.icmr.nic.in) and <https://niirncd.icmr.org.in/> respectively for any information related with the recruitment since beginning till the recruitment process is completed and ICMR/NIIRNCD will not be responsible if any candidate skips any important recruitment information due to not visiting the websites.

19. In case of any query please contact us using the following details:

**For technical matters:**

Email: [rameshk.h@icmr.gov.in](mailto:rameshk.h@icmr.gov.in)

Contact number: 0291-2729730

**For administrative matters:**

Email: [rec-niirncd@icmr.gov.in](mailto:rec-niirncd@icmr.gov.in)

Contact number: 0291-2722403

20. **Hindi version will follow.**

21. **In case of any discrepancy found in Hindi version of advertisement, the contents as given in the English version of Advertisement will be prevailed.**

Director In-charge  
ICMR-NIIRNCD, Jodhpur

**(Format of certificate to be submitted by Central Government Employees seeking age relaxation)**

**(To be produced on the Letter Head of the Department and to be filled by the Head of the Department in which the candidate is working)**

It is certified that Shri/Smt/Kum. \_\_\_\_\_ is a Central Government employee holding the post of \_\_\_\_\_ in the Pay Scale/Pay Level of Rs. \_\_\_\_\_ with 03 years regular/continuous service in the grade as \_\_\_\_\_ w.e.f. \_\_\_\_\_.

2. There is no objection to his appearing for the post of \_\_\_\_\_ and document verification for the said recruitment.

Signature \_\_\_\_\_

Name \_\_\_\_\_

Designation \_\_\_\_\_

Tel No \_\_\_\_\_

Office Seal \_\_\_\_\_

**EXPERIENCE CERTIFICATE FOR CANDIDATES WORKING IN THE ICMR  
PROJECTS**

**(To be produced on the Letter Head of the Institute/Centre and to be filled by the  
Head of the Department in which the candidate is working)**

It is certified that Shri/Smt/Kum. \_\_\_\_\_ is working at \_\_\_\_\_ as per the details given below:

<b>Sl. No.</b>	<b>Period (Initial to latest)</b>		<b>Designation</b>	<b>Name of the ICMR funded Project</b>	<b>Emoluments Drawn (Rs.)</b>	<b>Remarks</b>
	<b>From</b>	<b>To</b>				

Please state whether the candidate has entered into the project service within the prescribed age limit for the post for which the candidate is applying: - ..... (YES/NO)

There is no objection to his appearing for the post of \_\_\_\_\_ and document verification for the said recruitment.

**Note:- Please attach copies of the appointment letters and joining orders in r/o of each of the above mentioned work experience.**

Signature \_\_\_\_\_

Name \_\_\_\_\_

Designation \_\_\_\_\_

Tele No: \_\_\_\_\_

Office Seal \_\_\_\_\_

**Syllabus of written examinations for Technical Cadre Posts**

<b>Sl. No</b>	<b>Name of the Post</b>	<b>Syllabus</b>	<b>Questions</b>	<b>Marks</b>	<b>Remarks</b>
1	<b>Technical Assistant (Anthropology &amp; Computer Science/IT)</b>	<b>MCQ Type Questions consisting of :-</b>			The total duration will be 90 Minutes. There will be a negative marking. For every wrong answer, 0.25 marks will be deducted.
		Section A General Intelligence and Reasoning.	15	15	
		Section B General Awareness including current affairs	10	10	
		Section C Quantitative Aptitude	15	15	
		Section D English Language	10	10	
		Section E ICMR Related	10	10	
		Section F Trade/Subject related	40	40	
		<b>TOTAL</b>	<b>100</b>	<b>100</b>	
2	<b>Technician-1</b>	<b>MCQ Type Questions consisting of :-</b>			
		Section A General Intelligence and Reasoning.	20	20	
		Section B General Awareness including current affairs	20	20	
		Section C Quantitative Aptitude	20	20	
		Section D English Language	20	20	
		Section E ICMR Related	20	20	
		<b>TOTAL</b>	<b>100</b>	<b>100</b>	
3	<b>Laboratory Attendant -1</b>	<b>MCQ Type Questions consisting of :-</b>			
		Section A General Intelligence and Reasoning.	20	20	
		Section B General Awareness including current affairs	20	20	
		Section C Quantitative Aptitude	20	20	
		Section D English Language	20	20	
		Section E ICMR Related	20	20	
		<b>TOTAL</b>	<b>100</b>	<b>100</b>	

**NO OBJECTION CERTIFICATE**

**(To be produced on the Letter Head of the Department and to be filled by the Head of the Department in which the candidate is working)**

1. It is certified that Mr./Mrs./Miss/Dr. \_\_\_\_\_ (designation) \_\_\_\_\_ is working in the temporary/permanent capacity with effect from \_\_\_\_\_. The particulars furnished by him/her in the application form are correct and he/she possesses educational qualification and experience mentioned in the Vacancy Circular no. \_\_\_\_\_ dated \_\_\_\_\_.  
**This organization has no objection in his/her applying to the post of \_\_\_\_\_ as mentioned in the above stated circular.**
2. It is certified that his/her Pay Level is \_\_\_\_\_. He/She is drawing a Basic Pay of Rs. \_\_\_\_\_. He/her next increment is due on \_\_\_\_\_.
3. It is certified that in the event of selection of Mr./Mrs./Miss/Dr. \_\_\_\_\_ to the post of \_\_\_\_\_ at ICMR-NIIRNCD, New Pali Road, Jodhpur-342005, he/she shall be relieved within a period of 01 month of issue of Appointment letter to Mr/Mrs./Miss/Dr. \_\_\_\_\_ by ICMRNIIRNCD.

Place:

Date:

Signature \_\_\_\_\_

Name \_\_\_\_\_

Designation \_\_\_\_\_

Seal of the office \_\_\_\_\_

**NO OBJECTION CERTIFICATE**

**(To be produced on the Letter Head of the Department and to be filled by the Head of the Department in which the candidate is working)**

1. It is certified that Mr./Mrs./Miss/Dr. \_\_\_\_\_  
\_\_\_\_\_  
(designation) is working in the project entitled  
“\_\_\_\_\_”. This organization has no objection in  
his/her applying to the post of \_\_\_\_\_ as mentioned in the above  
stated circular.

Place \_\_\_\_\_

Date: \_\_\_\_\_

Signature : \_\_\_\_\_

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Seal of the office: \_\_\_\_\_

**FORM OF DECLARATION/UNDERTAKING TO BE SUBMITTED BY OBC  
CANDIDATE (IN ADDITION TO THE COMMUNITY CERTIFICATE)**

I, \_\_\_\_\_ Son/Daughter \_\_\_\_\_ of Shri \_\_\_\_\_  
resident \_\_\_\_\_ of \_\_\_\_\_ village/town/city \_\_\_\_\_  
District \_\_\_\_\_  
State \_\_\_\_\_ hereby declare that I belong  
to the \_\_\_\_\_ community which is recognized  
as a backward class by the Government of India for the purpose of reservation in Service  
admission in Central Govt. institutions as per orders contained in the Department of Personnel  
and Training Office Memorandum No. 36012/22/93-Estt.(SCT) dated 08th September, 1993.  
I also declare that I do not belong to the persons/sections (Creamy Layer) mentioned in  
Column 3 of the Schedule to the above referred Office Memorandum dated 08th September,  
1993, which is modified vide Department of Personnel and Training Office Memorandum  
No. 36033/1/2013-Estt. (Res.) dated 14th September, 2017

Signature of Candidates: \_\_\_\_\_

Full Name: \_\_\_\_\_

Correspondence Address: \_\_\_\_\_

Place:

Date:

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

This is 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 Social Justice and Empowerment's Resolution No. \_\_\_\_\_ dated \_\_\_\_\_ \*. 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 & Training O.M. No. 36012/22/93-Estt (SCT) dated 8.9.1993\*\*.

Signature.....

Designation.....\$

Dated:

Seal:

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\* The authority issuing the certificate may have to mention the details of Resolution of Government of India, in which the caste of the candidate is mentioned as OBC.

\*\* As amended from time to time.

\$- List of Authorities empowered to issue Other Backward Classes certificate will be the same as those empowered to issue Scheduled Caste/ Scheduled Tribe certificates.

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

**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/Tribes \_\_\_\_\_ which is recognized as a Scheduled Castes/Scheduled Tribes\* 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 Reorganization Act, 1960 & the Punjab Reorganization Act, 1966, the State of Himachal Pradesh Act 1970, the North-Eastern Area(Reorganization) 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 Order, 1959 as amended by the Scheduled Castes and Scheduled Tribes order (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 & Diu) Scheduled Castes Order, 1968@  
The Constitution (Goa, Daman & Diu) Scheduled Tribes 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) orders (Amendment) Act, 1990@  
The Constitution (ST) orders (Amendment) Ordinance 1991@  
The Constitution (ST) orders (Second Amendment) Act, 1991@  
The Constitution (ST) orders (Amendment) Ordinance 1996  
The Scheduled Caste and Scheduled Tribe Orders(Amendment ) Act 2002.  
The Constitution (Scheduled Caste) Orders(Amendment) Act 2002.  
The Constitution(Scheduled Caste and Scheduled Tribe) Orders(Amendment) Act 2002.  
The Constitution (Scheduled Caste) Order (Amendment) Act 2007.  
%2. 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/Srimati/Kumari\* \_\_\_\_\_ of village/town\* \_\_\_\_\_ in District/Division\* \_\_\_\_\_ of the State/Union Territory\* \_\_\_\_\_ who belong 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 the State/Union \_\_\_\_\_ Territory \_\_\_\_\_ of \_\_\_\_\_

Signature \_\_\_\_\_  
\*\* Designation \_\_\_\_\_  
(with seal of office)

Place \_\_\_\_\_

Date \_\_\_\_\_

\* Please delete the words which are not applicable

@ Please quote specific presidential order

% Delete the paragraph which is not applicable.

NOTE: The term 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 Certificates:**

- (i) District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Dy.Collector/Ist Class Stipendiary Magistrate/Sub-Divisional Magistrate/Extra-Assistant Commissioner/Taluka Magistrate/Executive Magistrate.
- (ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
- (iii) Revenue Officers not below the rank of Tehsildar.
- (iv) Sub-Divisional Officers of the area where the candidate and/or his family normally resides.

NOTE: ST candidates belonging to Tamil Nadu state should submit caste

certificate ONLY FROM THE REVENUE DIVISIONAL OFFICER.

**Performa-V**

Form-V

**Certificate of Disability**

(In cases of amputation or complete permanent paralysis of limbs  
and in cases of blindness)

[See rule 18(1)]

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE  
CERTIFICATE)

Recent Passport  
size Attested  
Photograph  
(Showing face only)  
of the person  
with disability

Certificate No. ....

Date: .....

This is to certify that I have carefully examined Shri/Smt/Kum  
..... son/ wife/ daughter of  
Shri..... Date of Birth .....  
(DD/ MM/ YY) Age ..... years, male/female  
..... Registration No. ..... permanent  
resident of House No. ..... Ward/Village/Street  
..... Post Office ..... District  
..... State ..... whose  
photograph is affixed above, and am satisfied that:

(A) he/she is a case of :

- locomotor disability
- dwarfism
- blindness

(Please tick as applicable)

(B) the diagnosis in his/her case is .....

(A) He/ She has .....% (in figure).....  
percent (in words) permanent Locomotor  
Disability/dwarfism/blindness in relation to his/her  
..... (part of body) as per guidelines  
(.....number and date of issue of the guidelines to be  
specified).

2. The applicant has submitted the following document as proof of residence:-

Nature of Document	Date of Issue	Details of authority issuing certificate

(Signature and Seal of Authorised Signatory of notified Medical Authority)

Signature/Thumb impression of the person in whose favour certificate of disability certificate is issued.

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Form-VI  
Certificate of Disability  
(In case of multiple disabilities)  
[See rule 18(1)]

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE  
CERTIFICATE)

Recent      Passport  
size      Attested  
Photograph  
(Showing face only)  
of the person with  
disability

Certificate No. .... Date: .....

This is to certify that we have carefully examined Shri/Smt/Kum  
..... /son/wife/daughter of Shri .....

Date of Birth..... (DD)/(MM)/(YY) ..... Age .....years,  
male/female..... Registration No.....

permanent                  resident                  of                  House  
No.....Ward/Village/Street.....

..... Post Office ..... District.....

State ..... whose photograph is affixed above, and are  
satisfied that:

(A) He/she is a Case of Multiple Disability. His/her extent of  
permanent physical impairment/disability has been evaluated as  
per guidelines (.....number and date of issue of the  
guidelines to be specified) for the disabilities ticked below, and  
shown against the relevant disability in the table below:

S. No	Disability	Affected part of body	Diagnosis	Permanent physical impairment/mental disability (in %)
1.	Locomotor disability	(@)		
2.	Muscular Dystrophy			
3.	Leprosy cured			
4.	Dwarfism			
5.	Cerebral Palsy			
6.	Acid attack Victim			
7.	Low vision	#		
8.	Blindness	#		
9.	Deaf	£		
10.	Hard of Hearing	£		
11.	Speech and Language disability			
12.	Intellectual Disability			
13.	Specific Learning Disability			
14.	Autism Spectrum Disorder			
15.	Mental illness			
16.	Chronic Neurological Conditions			
17.	Multiple sclerosis			
18.	Parkinson's disease			
19.	Haemophilia			
20.	Thalassemia			
21.	Sickle Cell disease			

(B) In the light of the above, his /her over all permanent physical impairment as per guidelines (.....number and date of issue of the 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.....  
(DD)/(MM)/(YY)

@ e.g. Left/right/both arms/legs

# e.g. Single eye

£ e.g. Left/Right/both ears

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

Nature of Document	Date of Issue	Details of authority issuing certificate

5. Signature and seal of the Medical Authority.

Name and seal of Member	Name and seal of Member	Name and seal of the Chairperson

Signature/Thumb impression of the person in whose favour certificate of disability is issued.

Form-VII  
Certificate of Disability  
(In cases other than those mentioned in Forms V and VI)  
(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE  
CERTIFICATE)  
[See rule 18(1)]

Recent Passport  
size Attested  
photograph  
(Showing face  
only) of the  
person with  
disability

Certificate No. .... Date: .....

This is to certify that I have carefully examined Shri/Smt./Kum ..... son/wife/daughter of Shri .....  
Date of Birth..... (DD)/(MM)/(YY) Age ..... years, male/female..... Registration No. ..... permanent resident of House No..... Ward/Village/Street ..... Post Office ..... District..... State ..... whose photograph is affixed above, and am satisfied that he/she is a case of ..... disability. His/her extent of percentage physical impairment/disability has been evaluated as per guidelines (to be specified) and is shown against the relevant disability in the table below:-

---

S. No	Disability	Affected part of body	Diagnosis	Permanent physical impairment/mental disability (in %)
1.	Locomotor disability	@		
2.	Muscular Dystrophy			
3.	Leprosy cured			
4.	Cerebral Palsy			
5.	Acid attack Victim			
6.	Low vision	#		
7.	Deaf	€		
8.	Hard of Hearing	€		
9.	Speech and Language disability			
10.	Intellectual Disability			
11.	Specific Learning Disability			
12.	Autism Spectrum Disorder			
13.	Mental illness			
14.	Chronic Neurological Conditions			
15.	Multiple sclerosis			
16.	Parkinson's disease			
17.	Haemophilia			
18.	Thalassemia			
19.	Sickle Cell disease			

(Please strike out the disabilities which are not applicable.)

2. The above 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 .....  
..... (DD)/(MM)/(YY)

@ - eg. Left/Right/both arms/legs

# - eg. Single eye/both eyes

€ - eg. Left/Right/both ears

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

Nature of Document	Date of Issue	Details of authority issuing certificate

(Authorised Signatory of notified Medical Authority)  
(Name and Seal)

Countersigned

(Countersignature and seal of the  
Chief Medical Officer/Medical Superintendent/  
Head of Government Hospital, in case the  
certificate is issued by a medical  
authority who is not a government  
servant (with seal))

Signature/Thumb  
impression of the person  
in whose favour certificate  
of disability is issued.

**Note:** In case this certificate is issued by a medical authority who is not a government servant, it shall be valid only if countersigned by the Chief Medical Officer of the District.

**Note:** The principal rules were published in the Gazette of India by Ministry of Social Justice and Empowerment vide notification number 489, dated 15.06.2017.