

# ಗ್ರಾಮ - ವಾರ್ಜ್ದ ಸವಿವಾಲಯಮು



# **ANNEXURE - B**

APPLICATION FORM FOR CERTIFICATE OF ELIGIBILITY FOR RESERVATION OF JOBS FOR THE OTHER BACKWARD CLASSES IN CIVIL POSTS AND SERVICES UNDER CENTRAL GOVT. OF INDIA

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I.

I request yo	u a	CERTIFIC	ATE in	respect	of	Reservation	for	BACKWARD
CLASSES in civil F	OS	ΓS & SERVI	ICES un	der Gove	rnn	nent of India	be gi	ranted to me.

LASS	ES in civil POSTS & SE	RVICES under Go	vernme	nt of India be gr	anted to me.
(	Given below of the neces	sary particulars			
1. I	Full name of the Applican	nt			
(1	In BLOCK LETTERS)		:		
2.	Gender		:		
3.	Date of Birth		:		
4.	Complete Resident Ac	ddress	:		
	a) PERMANENT				
	D. No:	Locality:		Village:	
	Mandal:	District:		Pin code:	
	b) PRESENT (Post	al Address)			
	D. No:	Locality:		Village:	
	Mandal:	District:		Pin code:	
5.	Religion		:		
6.	Caste		:		
7.	Sub-Caste		:		
8.	Issued Caste Certificat	te In Past	:	YES/NO	
9.			:	YES/NO	
10.	Occupation Group		:		
11.	SERIAL NUMBER of	f the Caste in the			
	CENTRAL LIST OF	OBCs	:		
12.	Name of the Father		:		
13.	Name of the Mother		:		
14.	Name of the Husband		:		
15.	Status of the Parents(S	S) / Husband	:	Father/	Mother/
				Husband	wife
	a) Constitutional Posts		:		
	b) Designation		:		
	c) I) Services: CENT	RAL / STATE	:		
	ii) Designation		:		
	iii) Scale of Pay, in	cluding	:		
	Clarification if	any	:		
	iv) Date of Appoir	itment of Post	:		
	v) Age of the time		:		
	To Class I post	(if applicable)	:		
EMP.	LOYMENT IN INTERNA	TIONAL ORGANII	DATION	I E.G., U.N., UNI	CEF, WHO
i					

# II.

Name of the Organization

Designation ii)

Period of Service TO iii) **FROM** 

(Indicate Date)

## III. A. DEATH / PERMENT INCAPACITION (OMIT IF NOT APPLICABLE)

i. Date of death / Permanent Incapacitation putting an Officer Out of Service Details of permanent incapacitation ii. B. EMPLOYMENT IN PUBLIC SECTOR UNDERTAKING ETC., Name of the Organization i. Designation ii. Date of appointment to the Post iii. ARMED FORCES INCLUDING PARA MILITARY FORCES (THIS WILL C. NOT INCLUDE PERSONS HOLDING CIVIL POSTS) i. Designation ii. Scale of Pay D. PROFESSIONAL CLASS (OTHER THAN THOSE COVERED IN THE ITEM NOS. B&C AND THOSE ENGAGED IN TRADE, BUSINESS AND INDUSTRY) i. Occupation / Profession E. PROPERTY OWNERS: I. Agricultural land holding owned by mother / father and minor Children i. Location Size of holding ii. a) IRRIGATED (TYPE OF IRRIGATION LAND) iii. i) ii) iii) b) UNIRRIGATED iv) Percentage of Irrigated Land Holding to statutory ceiling Limit under State Land Ceiling Land v) If land holding is both irrigated / unirrigated total irrigated land Holding on the basis of conversion Formula in State Land Ceiling vi) Percentage of total irrigated Land holding to statutory ceiling Limit as per (vi) TO BE CERTIFIED DISTRCT REVENUE OFFICER NOT LOWER THAN MANDAL REVENUE OFFCIER / TAHSILDAR

#### II. **PLANTATION**

i. Crops / Fruits ii. Location iii. Area of Plantation

# F. III. VACANT LAND AND / OR BUILDING IN URBAN AREA OF URBAN AGGLEMERATION

i. Location of Propertyii. Details of Propertyiii. Use to which it is put

### G. INCOME / WEALTH

i. Annual Income from all Source (Family Income) (Excluding Salaries and Income from Agrl. Land)

ii. Whether Tax Paid : YES / NO

iii. Whether covered in Wealth

Tax Act. (Yes / No)

(If so furnish details) :

16. Family members consisting : 17. Purpose of Caste Certificate : 18. Ration Card Number : 19. Aadhar Number :

20. Any other Information :

21. I certify that the above said particulars are true to the best of my knowledge and belief and that I do not belongs to CREAMY LAYER of OBCs and eligible to be considered for posts reserved for OBCs. In the event of any information being found false or incorrect of ineligibility being detected before off after the selection. I understand that my candidature appointment is liable to be cancelled and I shall be liable to such further action as may be provided under law /or rules.

Yours faithfully,

Place: Signature of the Candidate

Dated:

# Procedure (following to be enclosed)

1) Application \*

2) Ration Card/Aadhar Card/EPIC Card #

3) Applicant Father/Mother property particulars #

4) Applicant Father/Mother Employment

Particulars/Income Tax returns (for professionals) \*

(\*-mandatory #-any one of them)

**Contact Details** 

Land Line Number: Mobile Number: E- Mail ID: