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

This is to certify that Shri/Smt./Kum.*				r* of
Shri	_ of village/town	dis	trict	
in stat	e belongs to		community whic	h is
recognized as backward class under the Government of India, Ministry of Welfare Resolution				
No. 12011/68/93- BCC(C), dated 10 th September. 1993 published in the Gazette of India				
Extraordinary part I Secti	on I date 13 th	September	1993. Shri/Smt./K	um*
and	l/or his/her fai	mily ordinari	ly reside(s) in	the
District of the state. This is also to certify that he/she				
does not belong to the persons/selections (creamy layer) mentioned in column 3 (of the				
schedule to the Governn	nent OF India,	Department	of Personnel &Tra	ining
O.M.No.36012/22/93-Estt.(SCT), dated 8.9.1993) and modified vide Government of India,				
Department of Personnel and training O.M No.36033/3/2004 – Estt.(Res) dated 09.03.2004.				

District Magistrate, Deputy Commissioner etc..

Dated

Seal

N.B

(a) The term 'ordinarily' used here will have the same meaning as in section 20 of the Representation of the peoples Act, 1950

(b) Where the certificates are issued by Gazetted officers of the union Government or state Governments, they should be in the same form but counter signed by the District Magistrate or Deputy Commissioner (Certificates issued by Gazetted Officers and attested by District Magistrate/Deputy Commissioner are not sufficient)

* Should be dated on or after 01.10.2017.

DECLARATION

I _______ certify that the above said particulars are true to the best of my knowledge and belief and that do not belong to the Creamy Layer of OBCs and am eligible to be considered for the posts reserved for O.B.Cs. In the event of any information being found false or incorrect, or ineligibility being detected before or after the selection, I understand that my candidature/appointment is liable to be canceled and I shall be liable to such further action as may be provided under the law and/or Rules.

Yours faithfully,

Signature of the Candidate

Place:

Date: