

ANNEXURE “D”

FORM OF APPLICATION FOR CERTIFICATE OF CASTE

1. Name and complete address :-		
2. Place and Date of Birth :-		
3. Educational Qualification :-		
4. Are you married? If so, what is wife's/Husband's name.		
5. Father's name :-		
6. What is his/her occupation or profession		
7. i. Are you member of a schedule caste /Tribe of Community, Classified as Backward, by the State (Government).	Yes <input type="checkbox"/>	NO <input type="checkbox"/>
ii. If the answer to the above is yes, give complete details:-		
8. For what purpose is the Certificate of Caste required:-		
9. Did you apply for a Certificate of Caste at any time before and if so when:-		
10. Does your father/husband/wife hold Caste Certificate? If so, state the particulars:-		

Place : -

Date : -

Signature of the applicant

N.B. i) If it is found that the replies given by the applicant questions set above are incorrect by benefit derived hereby be summarily cancelled.

ii) Application will be required to produce proof with regard date and place of Birth and Caste and such proof as may.