

FORMATS FOR CERTIFICATES FOR RAILWAY RECRUITMENT CELL EXAMS

FORM OF CASTE CERTIFICATE FOR SC/ST

This is to certify that Shri/ Shrimati /Kumar*..... son/daughter* of Village /
Town / District/ Division* of the State / Union Territory*
belongs to the Caste* / Tribe which is recognised as a Scheduled Caste / Scheduled Tribe under:-

- *The Constitution Scheduled Castes Order, 1950.
- *The Constitution Scheduled Tribes Order, 1950.
- *The Constitution (Scheduled Castes) (Union Territories) (Part C States) Order, 1951;
- *The Constitution (Scheduled Tribes) (Union Territories) (Part C States) Order, 1951;
- [As amended by the Scheduled Castes and Scheduled Tribes Lists (Modification) Act, 1956, the Bombay Re-organisation Act, 1960, the Punjab Re-organisation Act, 1956, the State of Himachal Pradesh Act, 1970, the North Eastern Areas (Re-organisation) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders, (Amendment) Act, 1978]
- *The Constitution (Jammu and Kashmir)* Scheduled Castes Orders, 1958
- *The Constitution (Andaman and Nicobar Islands)* Scheduled Tribes Order, 1959 as amended by the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 1978
- *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 Orders, 1964
- *The Constitution (Uttar Pradesh) Scheduled Tribes 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 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 Act, 1991
- *The Constitution (ST) Orders (Amendment) Ordinance Act, 1998
- *The Constitution (Scheduled Castes) Orders (Amendment) Act, 2002
- *The Constitution (Scheduled Castes) Orders (Second Amendment) Act, 2002.
- *The Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 2002.

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/Shrimati/ Kumar..... of Village/
Town*..... In/District/ Division* of the State/ Union Territory* who belongs to the
..... Caste/ Tribe which is recognised as a Scheduled Caste/ Scheduled Tribe in the State/ Union Territory* issued by the dated.

3. Shri/Shrimati/Kumar* and /or* his/her* family ordinarily reside(s) in Village/ Town*..... District/ Division* of the State/ Union Territory* of

Place..... Signature.....
Date..... Designation.....
(with seal of Office)
State/ union Territory.....

* Please delete the words which are not applicable.

@ Please quote the specific presidential order.

% Delete the Paragraph, which is not applicable

Note : (a) The term 'ordinarily reside(s)' used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

The following Officers are authorised to issue caste certificates:

1. District Magistrate / Additional District Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / 1st Class Stipendiary Magistrate / Sub-Divisional Magistrate / Taluk Magistrate / Executive Magistrate / Extra Assistant Commissioner.
2. Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
3. Revenue Officers not below the rank of Tahsildar.
4. Sub-Divisional Officer of the area where the candidate and / or his / her family normally reside(s).
5. Certificates issued by Gazetted Officers of the Central or of a State Government Countersigned by the District Magistrate concerned.
6. Administrator/ Secretary to Administrator (Laccadive, Minicoy and Admninlvi Islands).

OBC CERTIFICATE FORMAT

**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 Shri / Smt. / Kum.*..... son/daughter* of Shri..... of
Village/Town..... District In State belongs to..... community which is
recognised as Backward Class under : (Indicate the Sub Caste above)

- 1) Resolution No.12011/69/93-BCC dated 10th September 1993, published in the Gazette of India - Extraordinary-part 1, Section 1, No.186, dated 13th September 1993.
- 2) Resolution No.12011/69/94-BCC, dated 18th October 1994, published in the Gazette of India - Extraordinary-part 1, Section 1, No.183, dated 20th October 1994.
- 3) Resolution No.12011/77/95-BCC, dated 24th May 1995, published in the Gazette of India - Extraordinary-part 1, Section 1, No.58, dated 23th May 1995.
- 4) Resolution No.12011/44/96-BCC, dated 8th December 1996, published in the Gazette of India - Extraordinary-part 1, Section 1, No.210, dated 11th December 1996.
- 5) Resolution No.12011/68/93-BCC, published in the Gazette of India - Extraordinary-No. 129, dated the 8th July 1997.
- 6) Resolution No.12011/12/96-BCC, published in the Gazette of India - Extraordinary-No. 164, dated the 1st September 1997.
- 7) Resolution No.12011/69/94-BCC, published in the Gazette of India - Extraordinary-No. 236, dated the 11th December 1997.
- 8) Resolution No.12011/13/97-BCC, published in the Gazette of India - Extraordinary-No. 239, dated the 3rd December 1997.
- 9) Resolution No.12011/12/96-BCC, published in the Gazette of India - Extraordinary-No. 166, dated the 3rd August 1998.
- 10) Resolution No.12011/69/93-BCC, published in the Gazette of India - Extraordinary-No. 171, dated the 6th August 1998.
- 11) Resolution No.12011/69/96-BCC, published in the Gazette of India - Extraordinary-No. 241, dated the 27th October 1998.
- 12) Resolution No.12011/69/96-BCC, published in the Gazette of India - Extraordinary-No. 270, dated the 6th December 1999.
- 13) Resolution No.12011/36/99-BCC, published in the Gazette of India - Extraordinary-No. 71, dated the 4th April 2000.

Shri/Smt./Kum.*.....and/or his/her family ordinarily reside(s) in the..... District 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 to the Government of India, Department of
Personnel & Training OM No. 3601222/93-Ext(SCT), dated 6.9.1993) and modified vide Government of India, Department of Personnel and Training O.M.No.36033/2004-Ext. (Res)
dated 06.03.2004.

Place :
Date :
DISTRICT MAGISTRATE / DY. COMMISSIONER ETC.
*Strike out whichever is not applicable (With Seal of Office)

NB : (a) The term 'ordinarily' used here will have the same meaning as in section 20 of the Representation of Peoples Act 1950. (b) The Authorities competent to issue caste certificates
are indicated below : (i) District Magistrate / Additional Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / 1st Class Stipendiary
Magistrate / Sub-Divisional Magistrate / Taluk Magistrate / Executive Magistrate / Extra Assistant Commissioner (not below the rank of 1st class Stipendiary Magistrate) (ii) Chief
Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate (iii) Revenue Officer not below the rank of Tahsildar, and (iv) Sub-Divisional Officer of the area
where the Candidate and or his family resides.

OBC Certificate should not be older than one year from the date of closure of the Employment Notice.

FORMATS FOR CERTIFICATES FOR RAILWAY RECRUITMENT CELL EXAMS

FORM OF MEDICAL CERTIFICATE FOR PERSONS WITH DISABILITIES (PWD)
NAME & ADDRESS OF THE INSTITUTE / HOSPITAL
DISABILITY CERTIFICATE Date:

Certificate No.

1. This is certified that Smt./Shri /Kum* son/daughter* of Shri age sex Male/ Female having identification marks as below is suffering from permanent disability of following category :

A. Locomotor or cerebral palsy :

(i) BL-Both legs affected but not arms. (a) Impaired reach (b) Weakness of grip

(ii) BA-Both arms affected

(iii) OL-One leg affected (right or left) (a) Impaired reach (b) Weakness of grip (c) Ataxic

(iv) OA-One arm affected (right or left) (a) Impaired reach (b) Weakness of grip (c) Ataxic

(v) BH-Stiff back and hips (cannot sit or stoop)

(vi) MW-Muscular weakness and limited physical endurance.

B. Blindness or Low Vision : (C) Hearing Impairment :

(i) B-Blind (ii) PB-Partially Blind (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 year..... months.

3. Percentage of disability in his / her case is percent.

4. Smt./Shri/Kum* meets the following physical requirement for

(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) (Signature of Doctor) (Signature of Doctor)
 Name : Name : Name :
 Registration No. : Registration No. : Registration No. :
 Member, Medical Board Member, Medical Board Member, Chairperson, Medical Board

* Please delete the words which are not applicable
 Place : Counter signature of the Medical Superintendent/CMO/
 Date : Head of Hospital (with seal)

Note : (i) According to the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full participation) Rules, 1996 notified 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 1995), authorities to give disability Certificates 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. (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'.

Proforma for declaration to be submitted by Other Backward Class Candidates at the time of document verification

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 recognised 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. 3601222/63-Ext.(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 08.03.1993 and its subsequent through O.M.No. 36033/3/2004-Ext.(Paa)/dated 09.03.2004*

Place: Signature of the Candidate
 Date: Name of the candidate

FORMAT OF INCOME CERTIFICATE TO BE ISSUED ON LETTER HEAD OF ISSUING
For Waiver of Examination Fees for RRB Examination
(Economically backward classes only)

1. Name of Candidate :

2. Father's Name :

3. Age :

4. Residential Address :

5. Annual Family Income (In words & Figures) :

6. Date of Issue :

7. Signature : Name

8. Stamps of Issuing Authority :

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

(1) District magistrate or any other Revenue Officer up in the level of Tahsildar (2) Sitting Member of Parliament of Lok Sabha for persons of their own responsibility (3) BPL Card or any other certificate issued by Central Government under a recognized poverty alleviation programme or Izzat MST issued by Railways. (4) Union Minister may also recommend to Chairman /RRBs for any persons from anywhere in the country. (5) Sitting Member of Parliament of Rajya Sabha for persons of the district in which these MPs normally reside.

SELF DECLARATION OF MINORITY CANDIDATES FOR WAIVER OF EXAMINATION FEE FOR RRB EXAMINATIONS

(Proforma for declaration to be submitted by Minority candidates at the time of Document Verification, who have applied posts against Centralised Employment Notice No 01/2014)

DECLARATION

I, son/daughter of Shri resident of village/ town/city district state hereby declare that I belong to the (Indicate minority community notified by Central Government i.e., Muslim / Sikh / Christian / Buddhist / Jain / Zoroastrians (Parsis))

Date : Signature of the Candidate
 Place : Name of the Candidate

Note : At the time of document verification such candidates claiming waiver of examination fee will be required to furnish 'Minority Community Declaration' affidavit on Non Judicial Stamp paper that he / she belongs to any of the minority community notified by Central Government (i.e., Muslim / Sikh / Christian / Buddhist / Jain / Zoroastrians (Parsis))

DECLARATION TO BE SUBMITTED BY VISUAL HANDICAPPED CANDIDATES
THOSE CANDIDATES WHOSE WRITING SPEED IS AFFECTED BY CEREBRAL PALSY

PARTICULARS OF SCRIBE PROPOSED TO BE ENGAGED BY THE CANDIDATE

1. Name of the Candidate :

2. Date of Birth of the Candidate :

3. Name of the Scribe :

4. Father's Name of the Scribe :

5. Address of the Scribe :

(a) Permanent Address :

(b) Present Address :

6. Educational Qualification of the Scribe :

7. Relationship, if any, of the Scribe to the Candidate :

8. DECLARATION:
 We hereby declare that the particulars furnished above are true and correct to the best of our knowledge and belief. We have read/ been read out the instructions of the Railway Recruitment Board regarding conduct of the visually challenged candidates/ scribes at this examination and hereby undertake to abide by them.

(Signature of the Candidate) (Signature of the Scribe)

Left thumb impression of the candidate in the box given above
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