

(Annexure to G.O.Ms.No.5, Scheduled Castes Development (POA.A2)

Department, dated 08.08.2014.) FORM OF APPLICATION FOR ISSUE OF COMMUNITY AND DATE OF BIRTH CERTIFICATE RELATING TO SCHEDULED CASTES / BACKWARD CLASSES UNDER **SECTION 3 (1) OF ACT 16 OF 1993**

(Information to be furnished by the applicant himself supported by the documentary Evidence)

То

The Mandal Revenue Officer /

Revenue Divisional Officer / Sub-Collector, Asst. Collector				
Mandal/ Division.				
District				
Sir				
I am in need of a Scheduled Caste /backward classes Community and Date of Birth Certificate for me / for my son/Daughter for which the details are given below:				
1. Name of the Applicant in full (in Block Letters)	:			
2. Sex of the Applicant	:			
3. a) Father's Name	:			
b) Mother's Name	:			
4. Present Postal Address	:			
5. Permanent place of residence	:			
6. Age, Date of Birth and Place of Birth (if date is	:			
not known approx, Year of Birth)				
7. Place of ordinary Residence Documents related	:			
to house/Land or other immovable property or				
Birth Registration Certificates or Ration Card or				
School records may be furnished				
8. If the applicant has been issued a Community	:			
Certificate in the past by any authority, a copy				
of such Certificate should be furnished.				
Community for which certificate is claimed (including Sub-Group)	:			
10. (a) Caste (including sub-caste) of the father	:			
(b). Caste (including sub-caste) of the mother				
11. Religion professed by the applicant	:			
12.(a) Religion professed by the father of the				
applicant				
(b) Religion professed by the mother of the	:			
applicant				
13. Whether the applicant is	:			
(a). A natural born son or daughter of his/her				
parents OR				
(b) Adopted son/daughter of his/her parents				
(3) Adopted Soff daugnter of his/her parents				

14. Aadhaar Number	:	
15. Household Survey No	:	

DECLARATION

I / We declare that the information furnished by me/us in the application is true and Correct, and the documents appended thereto are genuine and the contents of the Documents are true and correct and that if these are found to be untrue and incorrect, I/We Will be liable for prosecution for furnishing false and incorrect information documents under Section 10 of the Act No.16 of 1993.

Station	n:	Signature of the Applicant.
Date	:	

Signature of the Parent/Guardian

Enclosures:

- 1. Application Form*
- 2. Community Certificate issued to the family members#
- 3. SSC marks memo or DOB extract or Transfer certificate#
- 4. 1 TO 10th study certificate or DOB certificates issued by Municipality/Gram Panchayath*
- 5. Ration Card/EPIC Card /AADHAR CARD*
- 6. Documents related to immovable Properties#

(*-mandatory #-any one of them)