



If deceased, date of death .....  
 Relationship with the applicant .....

14. Educational & Technical qualification (Please write clearly)

Qualification	Name of the Institute with trade	Year of passing	Division	% in aggregate	Trade of ITI
Academic (10 <sup>th</sup> )					N/A
Technical (ITI with trade)					

15. Whether the ITI is approved by NCVT/SCVT :.....

16. Personal marks of identification:

1.	
2.	

17. Particulars of Fees :

Name of the Post office/Bank	IPO/Bank Draft No.	Date	Amount

18. Local Employment Exchange Registration No & Date (if any): \_\_\_\_\_

19. (a) I hereby declare that all the particulars given by me are true, complete and correct to the best of my knowledge and belief. I am aware that in the event of any information furnished by me is found false/incorrect at any stage; my candidature/apprenticeship may be cancelled without any notice.

(b) I also declare that I am applying for engagement for Apprenticeship training in one unit against one trade. In the event of being found myself applying in more than one unit and against one trade, my candidature will be rejected immediately without giving me any notice and appropriate action may be taken by Railway against me.

LTI/RTI of the candidate

Signature of the Candidate

Date & Place

Note: For the purpose of Item (13). Dependent relatives are those as defined in the Pass Rules. Particulars given at Item (13) verified and found correct.

.....  
 Signature of the In-charge of Office/Shop under whom the Railway Employee is/was working with designation & clear Office Seal.

.....  
 (FOR OFFICE USE ONLY)

Application accepted

Application is rejected due to \_\_\_\_\_

Date : \_\_\_\_\_

Signature of Scrutiny clerk \_\_\_\_\_

Signature of Office In-charge \_\_\_\_\_



**FORM OF CASTE CERTIFICATE FOR SC/ST CANDIDATES**

The format of the certificate to be produced by Scheduled Castes or Scheduled Tribes candidates applying for appointment to posts under the Government of India.

1. This is to certify that Shri/Smt/Kum\* ..... Son/Daughter\*  
of Shri/Smt..... of.....village/town\* .....  
District/Division\* ..... of state/Union Territory\* ..... belongs to the ..... Caste/Tribe \* which is recognized as Scheduled Caste/Schedule Tribe\* under:

- The Constitution (Scheduled Castes/Scheduled Tribes) order , 1950
- The Constitution (Scheduled Castes/ Scheduled Tribes) (Union Territories) order, 1951 [ as amended by the Schedule Castes and Scheduled Tribes Lists (Modification) Order, 1956, the Bombay Reorganization Act 1960, the Punjab Reorganization Act, 1966, the State of Himachal Pradesh Act, 1970, the North Eastern Area (Reorganization) Act, 1971 and the Scheduled Castes and Scheduled Tribes Order ( Amendment) Act, 1976 ].
- The Constitution (Jammu & Kashmir) Scheduled Castes order, 1956. The Constitution (Andaman and Nicobar Islands) Scheduled Tribes order, 1959 @ as amended by the Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976. The Constitution (Dadra and Nagar Haveli) Scheduled Caste order, 1962. The Constitution (Dadra and Nagar Haveli) Scheduled Tribes order, 1962@
- The Constitution (Pondicherry) Scheduled Caste order, 1964@
- The Constitution Scheduled Tribes (Uttar Pradesh) order, 1967@
- The Constitution (Goa, Daman and Diu) Scheduled Caste 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) Act, 1991@
- The Constitution (ST) orders (Second Amendment) Act, 1991@
- The Constitution (ST) orders (Amendment) Ordinance 1996

**%2. Application in the case of Scheduled Caste/Scheduled Tribe Persons who have migrated from one State/Union Territory Administration.**

This certificate is issued on the basis of Scheduled Caste/Scheduled Tribe certificate issued to Shri/Smt/\* of .....Father/Mother ..... of village /town\* ..... District/Division\* .....of state/Union Territory\* ..... who belongs to the ..... Caste/Tribe\* which is recognized as a Scheduled Caste/Scheduled Tribe in State/Union Territory\* issued by the ..... dated .....

**%3.**Shri/Smt/Kum\* .....and/or his/her \* family, ordinarily reside(s) in village/town\* .....of .....District/ Division\* of the State/Union Territory\* of .....

..... Place .....

Date .....

Signature

Designation

(With seal of office)

(\*) Please delete the words which are not applicable

(@) Please quote specific presidential Order

(%) Delete the Paragraph which is not applicable.

Note: The term\* ordinarily resides\* used will have the same meaning as in Section 20 of the Representation of the Peoples Act, 1950.

\*\* List of authorities empowered to issue Caste/Tribe certificates :

- i. District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Dy. Collector/1st Class Stipendiary Magistrate/Sub-Divisional Magistrate/Extra-Assistant Commissioner/Taluka Magistrate/Executive Magistrate.
- ii. Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
- iii. Revenue Officers not below the rank of Tehsildar.
- iv. Sub-Divisional Officers of the area where the candidate and/or his family normally resides.

Note: ST candidates belonging to Tamilnadu state should submit caste certificate ONLY FROM THE REVENUE DIVISIONAL OFFICER.8

The format of the certificate to be produced by OTHER BACKWARD CLASSES (OBC)  
applying for appointment to posts under the Government of India.

This is to certify that Shri Smt Kum\* ..... Son/Daughter\*  
of Shri Smt ..... of village /town\*  
..... District in ..... State belongs to the  
..... community which is recognized as backward class under ..... :  
(indicates Sub-caste)

- 1) Resolution No.12011/68/93-BCC(C) dated 10th September 1993, published in the Gazette of India – Extraordinary – part 1 Section 1, No.186 dated 13th September 1993.
- 2) Resolution No.12011/9/94-BCC dated 19th October 1994, published in the Gazette of India – Extraordinary – part 1 Section 1, No.163 dated 20th October 1994.
- 3) Resolution No.12011/7/95-BCC dated 24th May 1995, published in the Gazette of India – Extraordinary – part 1 Section 1, No.88 dated 25th May 1995.
- 4) Resolution No.12011/44/96-BCC dated 6th 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 8th July 1997.
- 6) Resolution No.12011/12/96-BCC published in the Gazette of India – Extraordinary No.164 dated 1st Sept. 1997.
- 7) Resolution No.12011/99/94-BCC published in the Gazette of India – Extraordinary No.236 dated 11th Dec 1997.
- 8) Resolution No.12011/13/97-BCC published in the Gazette of India – Extraordinary No.239 dated 3, Dec.1997.
- 9) Resolution No.12011/12/96-BCC published in the Gazette of India – Extraordinary No.166 dated 3, Aug.1998.
- 10) Resolution No.12011/68/93-BCC published in the Gazette of India – Extraordinary No.171 dated 6, Aug.1998.
- 11) Resolution No.12011/68/98-BCC published in the Gazette of India – Extraordinary No.241 dated 27, Oct.1999.
- 12) Resolution No.12011/88/98-BCC published in the Gazette of India – Extraordinary No.270 dated 6, Dec.1999.
- 13) Resolution No.12011/36/99-BCC published in the Gazette of India – Extraordinary No.71 dated 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.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.

(\* Please delete the words which are not applicable

Place ..... Date.....

District Magistrate/

Dy. Commissioner Etc.

(With seal of office)

(\* Please delete the words which are not applicable

a. The term "Ordinarily reside(s)" used 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 countersigned by the District Magistrate or Dy. Commissioner (Certificate  
issued by Gazetted Officers and attested by District Magistrate/Deputy Commissioner are not sufficient)

c. The OBC certificate from the authorities only will be accepted:-

1 District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy  
Commissioner/Dy. Collector/1st Class Stipendiary Magistrate/Extra Assistant Commissioner (not below the  
rank of 1st Class Stipendiary Magistrate)/ \* Sub-Divisional Magistrate/ Taluka Magistrate/Executive  
Magistrate.

2 Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.

3 Revenue Officers not below the rank of Tehsildar.

4 Sub-Divisional Officers of the area where the candidate and/or his family normally resides.

## Annexure E

### Northeast Frontier Railway

(To Be Certificate by the Government Authorised Doctor (Gazetted) NOT BELOW THE RANK ASSISTANT SURGEON OF THE CENTRAL/STATE MEDICAL SERVICES)

1. Name of the Candidate
2. Height/137 cms  
Weight/25.4 kgs  
Chest Expansion/  
Not Less than 5cms.

Photo to be attested by  
the Civil Surgeon who is  
giving the certificate with  
Signature and Seal

3. **EYES.**  
Minimum Standard of  
Visual Acuity (Bee-One)  
(a) 6/9, 6/12 with of without glasses  
(b) Binocular Vision  
(c) Colour Vision

{There should be no evidence of any morbid condition of either eye or the lids of either eye which may be liable to risk aggravation or recurrence}

4. **EARS.**  
Good Hearing without suppurative disease  
No hearing permitted

5. **SKIN.**  
No evidence of Acute or chronic skin  
Disease or Chronic ulceration

6. **SPEECH.**  
Should be preferably perfect without  
impediment

#### 7. ALIMENTARY SYSTEM

- 1) Should have sufficient number of natural  
teeth (in Healthy State) for mastication
- 2) No oral sepsis
- 3) Spleen should not be palpable
- 4) Liver should not be palpable

#### Others

Should not suffer from the following

- a) Hemorrhoids
- b) Hernia/Hydrocele
- c) Bubonocele
- d) Ischio-rectal.talabsces

**8. CARDIO, VASCULAR SYSTEM.**

- a) Blood Pressure should not exceed 85 diastolic and 140 systolic
- b) No sign of cardio vascular disease.

**9. RESPIRATORY SYSTEM.**

No deformation of chest causing impediment to breathing. Free from all disease of respiratory system. :

**10. GENITO URINARY SYSTEM.**

No Genitourinary disease or deformity :

**11. SKELETAL SYSTEM.**

No evidence of serious deformity of the spinal column of the extremities. :  
The function of all limbs should be within normal limits. :

**12. NERVOUS SYSTEM.**

No disease of Nervous system of any mental disease:

**13. GLANDULAR SYSTEM.**

No evidence to Tuberculosis or disease of Glandular:

**14. X'RAY OF LUNGS** :

**15. URINE SUGAR** :

**16. BLOOD GROUP** :

The above named candidate is free from evidence of any contagious or infectious disease He/She is not suffering from any disease which is likely to be aggravated by service or likely to him/her unfit for service or to endanger, the health of the public. He/She is also free from avoidance of tuberculosis in any form (active or healed), and also certified that he/she fit to undergo Apprenticeship Training in Railway Establishments under the Apprentices Act 1961

Date.

(SIGNATURE OF THE GOVERNMENT  
AUTHORISED DOCTOR (GAZETTED)  
(NOT BELOW THE RANK OF ASST  
SURGEON OF CENTRAL/STATE HOSPITAL  
GOVERNMENT MEDICAL SERVICE)

NAME OF THE DOCTOR

SEAL