ANNEXURE -I

PROFORMA FOR SCHEDULED CASTE AND SCHEDULED TRIBE CERTIFICATE

Form of certificate as prescribed in M.H.A., O.M., No. 42/21/49-N.G.S. dated the 28.1.1952, as revised in Dept. of Per- & A.R. letter No. 36012/6/76-Est. (S.CT), dated the 29.10.1977, to be produced by candidate belonging to a Scheduled Caste or a Scheduled Tribe in support of his/her claim.

CASTE CERTIFICATE

This is to certify that Shri/Smt./Kum.*.....son/daughter* of.....of village/town*.....in district/Division*.....of the State/Union Territory* .....belongs to the..... Caste/Tribe

which is recognized as a Scheduled Caste/Scheduled Tribe*under:

- The Constitution (Scheduled Caste) Order, 1950
- The Constitution (Scheduled Tribe) Order, 1950
- The Constitution (Scheduled Caste) (Union Territories) Order, 1951
- The Constitution (Scheduled Tribe) (Union Territories) Order, 1951

% 1. (as amended by the Scheduled Caste and Scheduled Tribe Lists (Modification) order, 1956, the Bombay Re-organization Act, 1960, the Punjab Re- organization Act, 1966, the State of Himachal Pradesh Act, 1970 the North Eastern Areas (Re-organization) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders, (Amendment) Act, 1976).

- The Constitution (Jammu and Kashmir) Scheduled Caste Order, 1956.
- The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959.
- The Constitution (Dadar and Nagar Haveli) Scheduled Caste Order, 1962.
- The Constitution (Dadar and Nagar Haveli) Scheduled Tribes, Order, 1962.
- The Constitution (Puducherry) Scheduled Caste Order, 1964
- The Constitution (Uttar Pradesh) Scheduled Tribes, Order, 1967.
- The Constitution (Goa, Daman & Diu) Scheduled Caste Order, 1968.
- The Constitution (Goa, Daman & Diu) Scheduled Tribes, Order, 1968.
- The Constitution (Nagaland) Scheduled Tribes Order, 1970.
- The Constitution (Sikkim) Scheduled Caste Order, 1978.
- The Constitution (Sikkim) Scheduled Tribes Order, 1978.

% 2. Applicable in the case of Scheduled Caste/Schedule Tribe persons who have migrated from one State/Union Territory Administration:

This certificate is issued on the basis of the Scheduled Caste/Scheduled Tribe* certificate issued to Shri/Smt* _____ father/mother of Shri/Smt/Kum* _____ of village/town in _____District/Division* _____ of the State/Union Territory*_____who belongs to the _____ caste/tribe which is recognized as a Scheduled Caste/Scheduled Tribe* in the State/Union Territory* _____ issued by the_____(name of prescribed authority) vide their No_____ date _____.

% 3.Shri*/Smt.*/Kum* _____ and/or his/her* family ordinary reside (s) in village/town*_____ of the State/Union Territory of_____

Signature_____
Designation_____

Date:_____ (With seal of Office)
Place: _____ State/Union Territory**

*Please delete the words which are not applicable.

• Please quote specific Presidential Order.

% Delete the paragraph which is not applicable.

**Should be signed by the Authorities empowered to issue Scheduled Caste/Scheduled Tribe certificates as specified above.

ANNEXURE-II

PROFORMA FOR OTHER BACKWARD CLASS (OBC) CERTIFICATE

(CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR ADMISSION TO CENTRAL EDUCATIONAL INSTITUTIONS (CEIs), UNDER THE GOVERNMENT OF INDIA)

This is to certify that Shri / Smt. / Kum. _____Son / Daughter of Shri / Smt. _____ of Village / Town _____ District / Division _____ in the _____ State belongs to the _____ Community which is recognized as a backward class under:

i) Resolution No. 12011/68/93-BCC(C) dated 10/09/93 published in the Gazette of India Extraordinary Part I Section No. 186 dated 13/09/93.
ii) Resolution No. 12011/9/94-BCC dated 19/10/94 published in the Gazette of India Extraordinary Part I Section I No. 163 dated 20/10/94.
iii) Resolution No. 12011/7/95-BCC dated 24/05/95 published in the Gazette of India Extraordinary Part I Section I No. 88 dated 25/05/95.
iv) Resolution No. 12011/96/94-BCC dated 9/03/96.
v) Resolution No. 12011/44/96-BCC dated 6/12/96 published in the Gazette of India Extraordinary Part I Section I No. 210 dated 11/12/96.
vi) Resolution No. 12011/13/97-BCC dated 03/12/97.
vii) Resolution No. 12011/99/94-BCC dated 11/12/97.
viii) Resolution No. 12011/68/98-BCC dated 27/10/99.
ix) Resolution No. 12011/88/98-BCC dated 6/12/99 published in the Gazette of India Extraordinary Part I Section I No. 270 dated 06/12/99.
x) Resolution No. 12011/36/99-BCC dated 04/04/2000 published in the Gazette of India Extraordinary Part I Section I No. 71 dated 04/04/2000.
xi) Resolution No. 12011/44/99-BCC dated 21/09/2000 published in the Gazette of India Extraordinary Part I Section I No. 210 dated 21/09/2000.
xii) Resolution No. 12015/9/2000-BCC dated 06/09/2001.
xiii) Resolution No. 12011/1/2001-BCC dated 19/06/2003.
xiv) Resolution No. 12011/4/2002-BCC dated 13/01/2004.
xv) Resolution No. 12011/9/2004-BCC dated 16/01/2006 published in the Gazette of India Extraordinary Part I Section I No. 210 dated 16/01/2006.
xvi) Resolution No. 12011/14/2004-BCC dated 12/03/2007 published in the Gazette of India Extraordinary Part I Section I No. 67 dated 12/03/2007.
xvii) Resolution No. 12018/6/2005-BCC dated 10/10/2007 published in the Gazette of India Extraordinary Part I Section I No. 311 dated 12/10/2007.
xviii) Resolution No. 12015/2/2007-BCC dated 18/08/2010 published in the Gazette of India Extraordinary Part I Section I No. 232 dated 18/08/2010 & Corrigendum dated 11/10/2010.

Shri / Smt. / Kum. _____ and / or his family ordinarily reside(s) in the _____ District / Division of _____ 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 O.M. No. 36012/22/93-Estt. (SCT) dated 08/09/93 which is modified vide OM No. 36033/3/2004 Estt.(Res.) dated 09/03/2004 or the latest notification of the Government of India.

Dated: **District Magistrate/ Competent Authority**
Seal

NOTE:

a. The Term Ordinarily used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.
b. The authorities competent to issue Caste Certificates are indicated below:
   i. District Magistrate/Additional Magistrate/1st Class Stipendiary Magistrate/Sub-Divisional Magistrate/Taluka 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 Tehsildar.
   iv. Sub-Divisional Officer of the area where the candidate and/or his family resides.
c. The annual income/status of the parents of the applicant should be based on financial year ending **March 31, 2022**.

ANNEXURE - III

Government of.....
(Name & Address of the authority issuing the certificate)

INCOME & ASSEST CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

CERTIFICATE NO: DATE:
VALID FOR THE YEAR:

This is to certify that Shri / Smt. / Kum. _____Son / Daughter/Wife of Shri / Smt. _____ permanent resident of Village / Town _____ District / Division _____ in the _____ State/Union Territory _____ Pincode _____ whose photograph is attested below belongs to the Economically Weaker Sections, since the gross annual income* of his/her family** is below Rs. 8 lakh (Rupees Eight Lakh only) for the financial year……..His/her family does not own or possess any of the following assets*** :

I. 5 acres of agricultural land and above;

II. Residential flat of 1000 sq. ft. and above;

Ill. Residential plot of 100 sq. yards and above in notified municipalities;

IV. Residential plot of 200 sq. yards and above in. areas other than the notified municipalities.

2. Shri/Smt./Kumari.....belongs to the.....caste which is not recognized as a Scheduled Caste, Scheduled Tribe and Other Backward Classes (Central List)

Paste Recent Passport Size Photograph of the Applicant here

Signature with seal of Office .....
Name.....
Designation.....

* **Note l:** Income covered all sources i.e. salary, agriculture, business, profession, etc.

** **Note 2:** The term 'Family" for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of IS years

***Note 3:** The property held by a "Family' in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

ANNEXURE-IV

List of Centres which will issue Disability Certificates as per 21 benchmark Disabilities given under RPwD Act-2016

S No.	Name of Disability Certification Centre	City/State	Specialties available for which Disability Certificate can be issued as per category of Disabilities mentioned in Disability Certificate
1	Vardhman Mahavir Medical College & Safdarjang Hospital (VMMC & SJH)	New Delhi	All disabilities as mentioned in Disability Certificate except auditory disabilities (ENT) and Intellectual Disabilities & Behavioural disabilities.
2	All India Institute of Physical Medicine and Rehabilitation (AIIPMR)	Mumbai	For locomotor disabilities only
3	Institute of Post Graduate Medical Education & Research (IPGMER)	Kolkata	All disabilities as mentioned in Disability Certificate
4	Madras Medical College (MMC)	Chennai	All disabilities as mentioned in Disability Certificate
5	Grant Government Medical College, J.J. Hospital Compound	Mumbai, Maharashtra	All disabilities as mentioned in Disability Certificate
6	Goa Medical College	Goa	All disabilities as mentioned in Disability Certificate except Speech Disability
7	Government Medical College, Thiruvananthapuram	Thiruvananthapuram	All disabilities as mentioned in Disability Certificate. Ophthalmology Tests to be conducted at Regional Institute of Ophthalmology, Thiruvananthapuram under GMC, Thiruvananthapuram

S No.	Name of Disability Certification Centre	City/State	Specialties available for which Disability Certificate can be issued as per category of Disabilities mentioned in Disability Certificate
8	SMS Medical College	Jaipur, Rajasthan	All disabilities as mentioned in Disability Certificate except: 1. Neurology - Genetic Testing 2. ENT - Speech & Language Disability Testing 3. Orthopaedics / PMR- Goniometer Adult, Plumb line, Hand Dynometer, Laser
9	Govt. Medical College and Hospital, Sector-32	Chandigarh	All disabilities as mentioned in Disability Certificate
10	Govt. Medical College, Agartala, State Disability Board	Agartala / Tripura	Information Awaited
11	Institute of Medical Sciences, Banaras Hindu University	Varanasi, Uttarpradesh	All disabilities as mentioned in Disability Certificate except Intellectual Disability
12	Ali Yavar Jung National Institute of Speech and Hearing Disabilities, Bandra, Mumbai	Mumbai, Maharashtra	For Hearing disabilities only
13	AIIMS Nagpur	Nagpur, Maharashtra	All disabilities as mentioned in Disability Certificate
14	Atal Bihari Vajpayee Institute of Medical Sciences & RML Hospital, New Delhi (ABVIMS &RMLH)	New Delhi	All disabilities as mentioned in Disability Certificate except ENT
15	Lady Hardinge Medical College & Associated Hospitals (LHMC)	New Delhi	All disabilities as mentioned in Disability Certificate except Intellectual Disability

CERTIFICATE OF DISABILITY

(As per MCI Gazette Notification No. MCI-18(1)/2018-Med./187262 dated 5th Feb, 2019/ 14th May, 2019 for admission to Medical Courses in All India Quota)

Certificate No._____ **Dated**_____

Recent Passport Size Photograph of the candidate duly attested by the issuing authority

Name of the Designated Disability Centre (as per ANNEXURE):

_____

This to certify that Dr. / Mr. / Ms._____

Aged_____ **Years Son/ Daughter of Mr.**_____

R/o _____

_____

NEET Roll No._____, **Rank No.**_____, **has the following**

Disability (Name of the Specified Disability) _____ (in percentage)

of_____ **(in words)** _____ **(in Figures).**

- **Please tick on the "Specified Disability"**
  (Assessment may be done on the basis of Gazette of India, Extraordinary, Part-II, Section 3 Sub-section(ii), Ministry of Social Justice and Empowerment)

S/No.	Disability Type	Type of Disability	Specified Disability
1.	**Physical Disability**	A. Locomotor Disability* B. Visual Impairment* C. Hearing Impairment* D. Speech & Language Disability	a. Leprosy cured person, b. Cerebral Palsy, c. Dwarfism, d. Muscular Dystrophy, e. Acid attack Victims, f. others such as Amputation, Poliomyelitis a. Blindness b. Low Vision a. Deaf b. Hard of hearing a. Organic/ Neurological causes
2.	**Intellectual Disability**		a. Specific Learning Disabilities(Perceptual disabilities, Dyslexia, Dyscalculia, Dyspraxia & Developmental Aphasia b. Autism Spectrum Disorders
3.	**Mental Behaviour**		a. Mental illness
4.	**Disability caused due to**	a. Chronic Neurological Conditions	i. Multiple Sclerosis ii. Parkinsonism
		b. Blood Disorders	i. Haemophilia, ii. Thalassemia, iii. Sickle Cell Disease
5.	**Multiple Disabilities including Deaf Blindness**		More than one of the above specified disabilities

- **Conclusion:** He/ She is **Eligible/ Not Eligible** for admission in Medical/ Dental courses as per the MCI Gazette Notification subject to his being otherwise medically fit.
- ❖ Functional competency with the aid of **Assistive devices** in case of **Locomotor*/ Visual*/ Hearing* Impairment,** if any _____

Sign & Name_____ **Sign & Name**_____ **Sign & Name**_____
(Concerned Specialist) **(Concerned Specialist)** **(Concerned Specialist)**

Medical Counselling Committee

National Board of Examinations in Medical Sciences
Medical Enclave, Ansari Nagar,
Mahatma Gandhi Marg (Ring Road)
New Delhi- 110029

Candidate Helpline: 022 - 61087595
(Monday to Friday: 09:30AM to 06:00 PM)
Website: https://natboard.edu.in and https://nbe.edu.in