

ANNEXURE- III
CERTIFICATES OF RESERVED CATEGORIES

Categories Code-12

CERTIFICATE OF SCHEDULED CASTE

**As per letter No.1/41/96-RCI/110001-17, dated 5.12.1996 of
Govt. of Punjab, Department of Welfare (Reservation Cell)**

It is certified that Shri/Shrimati/Kumari _____ son/daughter of
Sh. _____ of village/town _____ District/Division
_____ state of Punjab belongs to _____ caste which has been recognised
as Scheduled caste as per "The Constitution (Scheduled Castes) Order, 1950"

2. Shri/Shrimati/Kumari _____ and his/ her family lives in village/
town _____ District/ Division _____ of Punjab State

Date _____

Signature

Place _____

Designation
Seal of office

Competent authority to issue Caste Certificate

- I. District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/ Additional Deputy Commissioner/ Deputy Collector/First Class Stipendiary Magistrate/ City Magistrate/Sub Divisional Magistrate /Talika Magistrate/ Executive Magistrate/ Extra Assistant Commissioner (Not below the rank of first 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 normally resides.
- V. Administrator/Secretary to Administrator/Development Officer Lakshadweep Islands. (circulated vide no.2/223/79-SWI/4337, dated 8.6.90)

OR

The certificate for this purpose issued by any other competent authority declared by Government of Punjab in any other prescribed proforma.

For Category code – 13 (BC)

ਭਰਤੀ/ਦਾਖਲੇ ਸਮੇਂ ਪੱਛਤੀ ਸ਼੍ਰੇਣੀ ਨਾਲ ਸਬੰਧਤ ਵਿਅਕਤੀ ਤੋਂ ਲਏ ਜਾਣ ਵਾਲੇ ਸਵੈ-ਘੋਸ਼ਣਾ ਪੱਤਰ ਦਾ ਪਰੋਫਾਰਮਾ

1. ਮੈਂ.....ਪੁੱਤਰ/ਪੁੱਤਰੀ
ਸ੍ਰੀ.....
ਵਾਸੀ.....
ਪਿੰਡ/ਕਸਬਾ/ਸ਼ਹਿਰ.....ਜਿਲ੍ਹਾ.....
ਘੋਸ਼ਣਾ ਕਰਦਾ ਹਾਂ ਕਿ ਮੈਂ.....ਜਾਤੀ ਨਾਲ ਸਬੰਧਤ ਰੱਖਦਾ/ਰੱਖਦੀ ਹਾਂ ਤੇ ਇਹ ਜਾਤੀ ਪੰਜਾਬ ਸਰਕਾਰ ਵਲੋਂ ਪੱਤਰ ਨੰ:.....ਮਿਤੀ.....ਰਾਹੀਂ ਪੱਛਤੀ ਸ਼੍ਰੇਣੀ ਕਰਾਰ ਦਿੱਤੀ ਗਈ ਹੈ।
2. ਮੈਂ ਇਹ ਵੀ ਘੋਸ਼ਣਾ ਕਰਦਾ ਹਾਂ ਕਿ ਮੈਂ ਪੰਜਾਬ ਸਰਕਾਰ ਵਲੋਂ ਜਾਰੀ ਹਦਾਇਤਾਂ ਨੰ: 1/41/93-ਰਸ1/459 ਮਿਤੀ 17.01.1994 ਜਿਸ ਨੂੰ ਬਾਅਦ ਵਿੱਚ ਪੱਤਰ ਮਿਤੀ ਨੰ: 1/41/93-ਰਸ1/1597 ਮਿਤੀ 17.08.2005, ਮਿਤੀ 1/41/93-ਰਸ1/209 ਮਿਤੀ 04.02.2009 ਅਤੇ ਪੱਤਰ ਨੰ: 1/41/93-ਰਸ1/609 ਮਿਤੀ 24.10.2013 ਨਾਲ ਸੋਧਿਆ ਗਿਆ ਹੈ, ਦੀ ਅਨੁਸੂਚੀ ਵਿੱਚ ਦਰਜ ਕਾਲਮ 3 ਦੇ ਅਧੀਨ ਨਹੀਂ ਆਉਂਦਾ।

ਸਥਾਨ:

ਘੋਸ਼ਣਾ ਕਰਤਾ

ਮਿਤੀ

ਵੈਰੀਫਿਕੇਸ਼ਨ:-

ਮੈਂ ਇੱਥੇ ਇਹ ਘੋਸ਼ਣਾ ਕਰਦਾ ਹਾਂ ਕਿ ਉਪਰੋਕਤ ਦਿੱਤੀ ਗਈ ਜਾਣਕਾਰੀ ਮੇਰੀ ਸਮਝ ਅਨੁਸਾਰ ਸਹੀ ਵਾ ਦਰੁਸਤ ਹੈ ਅਤੇ ਇਸ ਵਿੱਚ ਕੁਝ ਵੀ ਛੁਪਾਇਆ ਨਹੀਂ ਗਿਆ। ਮੈਂ ਇਨ੍ਹਾਂ ਤੱਥਾਂ ਤੋਂ ਜਾਣੂੰ ਹਾਂ ਕਿ ਜੇਕਰ ਮੇਰੀ ਕੋਈ ਵੀ ਦਿੱਤੀ ਸੂਚਨਾ ਗਲਤ ਨਿਕਲਦੀ ਹੈ ਤਾਂ ਮੈਂ ਕਾਨੂੰਨ ਵਿੱਚ ਦਰਜ ਸਜ਼ਾ ਦਾ ਹੱਕਦਾਰ ਹੋਵਾਂਗਾ ਅਤੇ ਪ੍ਰਾਰਥੀ ਨੂੰ ਇਸ ਸੂਚਨਾ ਦੇ ਆਧਾਰ ਤੇ ਦਿੱਤੇ ਗਏ ਲਾਭ ਵਾਪਿਸ ਲੈ ਲਏ ਜਾਣਗੇ।

ਸਥਾਨ:

ਘੋਸ਼ਣਾ ਕਰਤਾ

ਮਿਤੀ:

ਨੋਟ:ਜੇਕਰ ਪ੍ਰਾਰਥੀ ਨਾਬਾਲਿਗ ਹੈ ਤਾਂ ਪ੍ਰਾਰਥੀ ਦੇ ਪਿਤਾ, ਮਾਤਾ ਜਾਂ ਕਾਨੂੰਨੀ ਗਾਰਡੀਅਨ ਵਲੋਂ ਘੋਸ਼ਣਾ ਪੱਤਰ ਦਿੱਤਾ ਜਾਵੇਗਾ।

Category Code-13

**FORM OF CERTIFICATE TO BE PRODUCED BY A CANDIDATE BELONGING
TO A BACKWARD CLASS IN SUPPORT OF HIS/HER CLAIM.**

Government of Punjab

Office of the _____ District _____

Certificate of Backward Class

Certificate No. _____

This is to certify that Shri/Smt./Kumari _____

Son/Daughter of _____

Village _____

District/Division _____

In the State of Punjab belongs to the _____ community which is recognized as a backward class under the Government of Punjab, Department of Welfare of SCs and BCs vide Notification No. _____ dated _____

Shri/Smt./Kumari _____ and or his/ her family ordinarily resides in the _____ District/Division of the State of Punjab.

This is also to certify that he/ she does not belong to the person/ sections (Creamy Layer) mentioned in Column 3 of the Schedule to the Government of Punjab Department of Welfare of SCs & BCs Notification No. 1/41/93-RC1 dated 17.01.1994. as amended vide Notification No. 1/41/93-RC1/1597 dated 17.08.2005, Notification No. 1/41/93-RC1/209 dated 24.02.2009 and Notification No. 1/41/93-RC1/609 dated 24.10.2013.

Date of Issuance

Signature of Issuing Authority



Designation

Date

Place

Note: The term "Ordinarily" used here will have same meaning as in Section 20 of Representation of People Act, 1950.

CATEGORY CODE-14

BACKWARD AREA CERTIFICATE

Dispatch No. _____

Date _____

Certified that _____ son/daughter of Shri
_____ is a bonafide resident of
_____ Tehsil _____

District _____ which has been declared as Backward Area by the Punjab Government.

His/her claim falls under category* _____ indicated below:

- a) a person who with the family members has been residing in a particular village or town included in the list of areas which are declared backward constantly for a period of ten years or more and is likely to continue to reside there.
- b) a person who has been residing in the village/ town for a period of less than ten years but not less than five years who is likely to reside there on account of the fact that he has obtained employment and will settle there after retirement.

In case of a person who has been residing in a village or town included in the list of areas which are declared backward and has migrated to another village or town in the said area, the total of his stay at both places will be counted.

Dated:

DC/GA to DC or SDM
(With Official Seal)

- Please mention here category (a) or (b) as the case may be.
- Certificate from authority other than DC/GA to DC or SDM is not valid and will not be accepted.

CATEGORY CODE- 15

CERTIFICATE OF HAILING FROM BORDER AREA

Dispatch No. _____

Date _____

i) I certify that _____ son/ daughter of Shri _____ of village _____ District _____ is a bonafide resident of village _____ District _____. The village/ town falls within the belt of 10 miles from the international border.

It is further certified that _____ has studied for at least 5 years in a recognized institution located in such village/ town as per dates of joining and leaving school/ college given below:-

- (1) _____
- (2) _____
- (3) _____
- (4) _____

*DC/GA to DC/ SDM of the concerned Distt.

Dated _____

(With Official Seal)

* Certificate from no other authority will be accepted.

ii) Certified that _____ son/ daughter of Shri _____ of village _____ District _____ was a bonafide student of the School/ College from _____ to _____ (exact date of joining and leaving the school/ college to be given) (Nursery/ LKG/ UKG etc. not included).

Place _____

Signature of Headmaster/ Principal of

the

Date _____

School/ College (With Seal)

NOTE: A candidate shall be eligible for admission under Border Area of category above only if he/she hails from a town/ village within the belt of ten miles from the international border and he/ she has studied for at least five years in a recognized institution located in such town/village (Nursery/LKG/UKG etc. not included). Two certificates to this effect should be obtained, one from DC/GA to DC of the District or the Sub-Divisional Magistrate of the Sub-Division concerned and another from the Headmaster/Principal of the Institution with details of exact date of joining and leaving the School/College. Exact particulars must be mentioned in the certificates.

CATEGORY CODE – 16

CERTIFICATE OF DISABILITY
(As per Rights of Persons with Disabilities Act, 2016)
For Admission to B.Sc. Nursing Courses as per approved instruction of GOI

Certificate No. _____ Dated _____

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

Aged _____ Years Son/Daughter of Mr. _____

R/o _____

Rank No. _____ is suffering From _____ (Name of

The Disease) and has Permanent Physical Impairment (PPI) of Left/Right/Both Lower Limb/other disabilities. He/She is

Locomotor disabled/ other disabilities and has the percentage of _____ (in words)

_____ (in Figure) of (40% - 70%) disability of lower limbs/other disability.

He/She is eligible/NOT eligible for admission in Medical/Dental Courses as per the MCI/DCI guidelines subject to his being otherwise medically fit.

Recent Passport
size photograph of
the candidate duly
attested by the
issuing authority

Sign.& Name _____

Sign. & Name _____

Sign. & Name _____

(Concerned Specialist)

(Concerned Specialist)

(Concerned Specialist)

Note: The eligibility of the handicapped categories candidates will be determined by the Medical Board at the time of counselling as per Punjab Govt. Notification/s.

CATEGORY CODE - 17

The eligibility of the candidates under Sports Category will be decided at the time of counselling as per Punjab Govt. Notification/s.

CATEGORY CODE-18
CERTIFICATE IN RESPECT CHILDREN/GRANDCHILDREN OF PERSONS KILLED IN TERRORIST
ACTION IN PUNJAB/IN RIOTS OUTSIDE PUNJAB

No. _____ Date _____

Certified that Mr./MS. _____ Son/Daughter of Sh. _____ R/o _____
_____ was
killed in terrorist action in Punjab/in riots outside Punjab. He/She was Father/Mother/Grand Father/ Grand
Mother/ Guardian of _____
(name of candidate)

(*Guardian will be considered only in case neither parent was alive at the relevant time).

Date _____ D.C./G.A. to D.C. of the respective District
(With seal)

CATEGORY CODE –19
CERTIFICATE IN RESPECT CHILDREN/GRANDCHILDREN OF TERRORIST/RIOT AFFECTED/DISPLACED
PERSONS

No. _____ Date _____

Certified that Mr./MS. _____ Son/Daughter of Sh. _____ R/o _____
_____ is
terrorist/riot affected / displaced person. He/She is/was Father/Mother/Grand Father/ Grand
Mother/Guardian of _____
(name of candidate)

(*Guardian will be considered only in case neither parent was alive at the relevant time).

Date _____ D.C./G.A. to D.C. of the respective District
(With seal)

CATEGORIES CODE- 20 TO 25

CERTIFICATE TO BE FURNISHED BY WARDS OF DEFENCE PERSONNEL KILLED OR DISABLED TO THE
EXTENT OF 50% OR MORE IN ACTION, WARDS OF GALLENTARY AWARDEES AND WARDS OF SERVING
DEFENCE PERSONNEL.

Certified that Mr./Ms. _____ Son/Daughter of Sh. _____ resident of _____
_____ is/was father/mother/guardian of Sh./Mrs. _____ (Name of the
candidate) has been/is:

- i) Killed in action.
- ii) disabled in action to the extent of 50% or above & Boarded out of service.
- iii) Died while in service & Death attributed to military service
- iv) Disabled in service & Boarded out with diseasable attributed to military service.
- v) Gallantry award/ other award winners both in service/ retired.
- vi) Serving Defence Personnel/Ex-serviceman

Date: (Official Seal) Signature of Commanding Officer/
Secretary District Sainik Welfare

Note: The candidates seeking admission against above category should produce a certificate from the Army Headquarters or the Commanding Officer of the Unit in the case of serving defence personnel and Army headquarters or Commanding Officer of the last armed Unit or Secretary Zila Sainik Board countersigned by the Secretary, Rajya Sainik Board as the case may be in the case of Ex-defence personnel. In doubtful cases of Ex-defence personnel, discharge certificate may be asked for

CATEGORIES CODE- 26 TO 28

CERTIFICATE TO BE FURNISHED BY WARDS OF PUNJAB POLICE PERSONNEL, PUNJAB ARMED POLICE, PUNJAB HOME GUARDS AND PARA- MILITARY FORCES KILLED OR DISABLED TO THE EXTENT OF 50% OR MORE IN ACTION AND WINNERS OF PRESIDENTS POLICE MEDAL FOR GALLANTRY OR POLICE MEDAL FOR GALLANTRY.

Dispatch No. _____

Dated _____

Certified that Mr/Ms _____ S/D of Mr/Ms _____
was killed/50% or more disabled in action which took place at _____ on
_____/decorated with President Police Medal for Gallantry/winner of Police Medal for Gallantry is a
Punjab Police Personnel/ Punjab Armed Police/ Punjab Home Guards/ Para Military Forces Personnel.

He/She is/was *Father/Mother/Guardian of _____

(Name of Candidate)

and the candidate is fully dependent upon him/her. (Guardian will be considered in place of Father/Mother only in case neither parents was alive at the relevant time)

Date:

Signature of IG Police (HQ), Punjab
(Seal)

* Strike through whichever is not applicable.

CATEGORY CODE - 29

CERTIFICATE FOR CHILDREN/GRAND CHILDREN OF FREEDOM FIGHTERS

Dispatch No. _____

Date _____

Certified that Mr/Ms _____ Son/Daughter of Sh. _____ of
village _____ P.O. _____ Tehsil _____ District _____ is a
bonafide freedom fighter and has been granted freedom fighter's pension by the Punjab Government vide
letter No. _____ dated _____ or has been awarded Tamra Patra for his political sufferings.

He/She is/was *Grand Father/ Grand Mother/Father/Mother of _____

(Name of Candidate)

Place:

Date: (Official Seal)

Signature of *DC/ADC/ GA to DC
of the Distt to which the
freedom fighter belongs to.

* Strike through whichever is not applicable.

* Certificate from no other authority will be accepted

Category Code 30

Tsunami Victims

Certificate from appropriate authority to be produced at the time of counselling.
