ourt Fee Stamp as required	<u>APF</u>	<u>PLICATION FORM FOR ISSUAN</u>	ICE OF	
	SOCIALLY AND EDUCA	TIONALLY BACKWORD C	ASTE CERTIFICATE	
Tields marked * are mandatory	(Paste Applicant
Service Payment Details:		0.00		Photo
1. Service Charges of the ki	* *	8.00		
2.Printing Charges per un		10.00		
3. Scanning Charges per u		5.00		
4. The Government fees per unit =		30.00		
5.Degs Charges fee per u	nıt =	2.00		
		Total 55.00.		
(The amount may vary based	on no of printing and scaning page	e counts)] [
Documents Required			Applicant's signatutre / The	umb Impression
Mandatory Documents			••	•
Supporting Documents		1. RoR 2. Self Dec 3. Land Pa 4. Any othe		n
Delivery Time Lines ; Es	timated Timelines To Process	The Application (Expected Date	te of Delivery) : 30 working Day	/S
	Fill all th	e details in the block lette	<u>ers</u>	
Personal Details				
Applicant Name*	:			
Gender*		Marital Status*:		
Date of Birth*	:			
Parents Details				
Father Name*	;-			
Mother Name*				
·	:			
Spouse Details				
Spouse Name*				
Relation With Applicant*	:			
Contact Details Phone No		Mobile No		
	:		;	
Email	:			
Permanent Address :-	Urban	Rural		
Permanent Address				
District *	;	Sub Division *	÷	
Tahsil *	:	RI Circle *	:	
Block *	;			
GP/ULB	:	_ Village / Ward* :		· · · · · · · · · · · · · · · · · · ·
House No/Street Name	;	Post Office	:	
Police Station *	:	Pin	:	
Submitter Details				
Is applicant and submitte	er are same? * Yes No)		
Submitter's Name*	:		·	
Relation With Applicant*				

Present Address :-	Urban	Rural		
Is Present Address Same as I (If "No" please fill the Presen		Yes No		
Permanent Address				
District *	•_	Sub Division *	•-	
Tahsil *	;			· · · · · · · · · · · · · · · · · · ·
Block *	;			
GP/ULB	:			
House No/Street Name	;-			
Police Station *	:	Pin	:	
Caste Details :-				
Religion * :		Caste* _		
Sub Caste/Community :		Occupational	l Background :	
Purpose :-				
Constitutional Post: Designation: Government Servic		<u>Father</u>	<u>Mother</u>	<u>Spouse</u>
Service(Central/State):				
Designation:				
Scale of Pay, including classific	•			
Date of appointment to the Post				
Age at the time of promotion to	-			
Employment of International	<u>Organization</u>			
Name of Organization:				
Designation:			-	
Period of Service Form:				
Period of Service To;				
Death/Permanent In-capacitati	ion (Putting an officer o	out of Service):		
Date of Death/Permanent In-capa	acitation:		 	

Details of permanent In-capacitation;

Employment in public Sector Undertaking			
Name of organization;			
Designation:			_
Date of appointment to the post:			_
Armed Forces including Para-military forces			
Designation:			
Scale of pay;		_	_
Professional Class(Please indicate whether engaged in	Trade, Business and Indu	stry)	
Applicant's Occupation/Profession:			
Property Owners			
Agricultural land holding (owned by mother, father and m	inor children)		
Location:			
Size of holding (Area):			
Irrigated (type of Irrigated Land)			
I			
ш			
III			
<u>Unirrigated</u>			
IV. Percentage of irrigated landholding to statutory ceiling	limit		
Under state land ceiling law:			
V. If land holding is both irrigated/un-irrigated total irrigat	ed land		
holding on the basis of conversion formula under state land	d celing law:		
VI. Percentage of total irrigated land holding to statutory of	ceiling limits as per (V):		
<u>Plantation</u>			
Crops/Fruits:			
Location:			
Area of Plantation:			

Vacant land and buildings in Urban areas or Urban	<u>Agglomerat</u>	<u>ion</u>				
Location of property:						
Details of property:						
Use to which it is put:						·
Income /Wealth						
Annual family income from all Sources (including sal	aries &					
Income from agriculture land):						
Whether Tax Payer (if yes, a copy of the last 3 return	s be furnish	ed):				
Whether covered in wealth tax act(if yes,Furnish det	tails):					
Wealth Tax Details:						
Any other remarks;						
I, Shri / Smtresident of village						
particulars are true to the best of my knowledge ar be considered for the posts reserved for S.E.B.C/O. being detected before or after the selection, I und liable to such further actions as may be provided und	nd belief tha B.Cs. In the Ierstand tha	t I do not belo event of any i t my candidat	ong to the Cre nformation be	amy Layer of eing found fal	S.E.B.C/O.B.Cs. se or incorrect,	and eligible to or ineligibility
	Yes	No				

Signature of the applicant