FORM'V' SRO 375 DATED 26-02-2002

OFFICE OF TEHSILDAR

"CERTIFICAE OF BEING A MEMBER OF THE SOCIALLY AND EDUCATIONALLY BACKWARD CLASS"

This is to ce	rtify that		PASTE YOUR
S/o			RECENT PASSPORT SIZE
Tehsil	District	_ is member of the socially and	PHOTOGRAPH
educationall	y backward class falling under the category.		L
i) ii) iii)	Resident of Backward Area. Resident of area adjoining line of Actual Control Weaker and under privileged class (Social Caste		
This is also	certified that the said		
Submitted h	is application for grant of this certificate to this off	icer on	
and the certi	ficate has been delivered to him under my hand an	d seal today on	
	ate is issued as per the verification conducted by		
(Enquiry Of	ficer) and on the basis of recommendation made	by him vide his No:	
dated	after his proper verification or	n spot and shall be deemed as o	cancelled /
shall be liab	le to cancellation if it is found that the certificate	has be liable to cancellation if	it is found
that the certi	ficate has been obtained on mistaken founds or on	false information or in case it is	s known to
any body ai	nthorities/issuing authority that my information h	as been kept hidden or has no	ot been let
known to th	e authorities, which would render the applicant not	eligible for the certificate benef	fit.
	e years only.	Ç	
No.			
Dated:		Signature of the	
		Authorized Officer, wit	th seal

APPLICATION FOR THE CERTIFICATE UNDER CATEGORY OF SOCIAL $\underline{\text{CASTE}}$

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I request that a certificate of my being from the category of the weak under privileged class defined as socially & Educationally backward (Social Caste vide SRO 126/208 dated 3rd july,1982) as amended from time to time my please be issued in my favour/in favour of my son/daughter. The grounds of my claim and other particulars are given below as under:-

1.	Name of Applicant:
	(in case candidate applies himself)
2.	Father's name:
3.	Name of candidate in case his/
	her father or a person on whom
	he/she is dependent applies for certificate
4.	Name of person on whom he/she depends
	If father is not alive :
5.	Place of residence of applicant. (in case candidate himself applies) i) Mohalla/village:
	ii) Tehsil:
	iii) District:
6.	Place of residence of a person On whom dependent.(in case father is not alive)
7.	What is the occupation of father of Candidate:
8.	What is the occupation of the person On whom the candidate depends
9.	The father of the applicant is (& if Dead before his death) actually engaged In perusing is being claimed in the Category of weak under privileged (Social Caste) Class
10.	The person on whom the applicant is Dependent (if father is dead) is actually Engaged in perusing the occupation on the Basis whereof benefit is being claimed In the category of weak and under privileged (Social Cast) Class:

11. **DECLARATION**:

I solemnly declare that the entries made by me in the above application are true and nothing has been concealed and neither I nor my father/guardian has received any benefit for my reserved category.

AFFIDAVIT

I,		
S/o		
R/o		
do hereby solemnly affirm and declare on oath as under:-		
1) That I am a permanent resident of J&K state.		
2) That I and my family belong to Social Caste under the Category of		
3) That I have not obtained my social caste category certificate till date.		
4) That I am in need of my category certificate.		
) That this affidavit is solicited for issuance of social Caste category certificate.		
Hence this affidavit is sworn.		
Deponent		
Verification:-		
Verified that the contents of this affidavit are true and correct to the		
best of my knowledge and belief.		

Deponent