## UNION PUBLIC SERVICE COMMISSION

Date of STARTING filling online DAF: 23<sup>rd</sup> July, 2018.

Date of CLOSURE for filling online DAF: 6<sup>th</sup> August, 2018

#### INSTRUCTIONS TO CANDIDATES OF CIVIL SERVICES (MAIN) EXAMINATION, 2018

- 1. The Main Examination in the scheme of the Civil Services Examination, <u>2018</u> for the services and posts mentioned in preamble to the Rules will be held from <u>28<sup>th</sup> September</u>, <u>2018</u>. The detailed Time Table of Examination will be made available along with the e-Admit Card.
- 2. The Main Examination will be held at following Centres:—

Ahmedabad, Aizawl, Allahabad, <u>Bengaluru</u>, Bhopal, Chandigarh, Chennai, Cuttack, Dehradun, Delhi, Dispur (Guwahati), Hyderabad, Jaipur, Jammu, Kolkata, Lucknow, Mumbai, Patna, Raipur, Ranchi, Shillong, Shimla, Thiruvananthapuram and Vijayawada.

In the interest of coordinated and secured logistics, the Commission may not operate Centres where the number of candidates is very low. In such cases, the Commission may allot nearest Centres to the candidates. **THE DECISION OF THE COMMISSION IN THIS REGARD WILL BE FINAL AND NO FURTHER CORRESPONDENCEWILLBEENTERTAINEDFROMCANDIDATES.** 

- 3. The Centres and the dates of holding the Main Examination as mentioned above are liable to be changed at the discretion of the Commission. While every effort will be made to allot the candidate to the Centre of his choice, the Commission may, at their discretion allot a different Centre or a new Centre that may be opened when circumstances so warrant.
- 4.1. The qualified candidate seeking admission to the Civil Services (Main) Examination must apply online through the Commission's website (www.upsc.gov.in) by filling the Detailed Application Form (DAF) and uploading the scanned copies of the required document within the prescribed time limit so that DAF is submitted by the applicant on time. However, the OBC (non-creamy layer) candidates will be required to fill the OBC Annexure alongwith the Detailed Application Form, on line.
- **4.2** The candidates are required to provide details of any of their Photo ID Proofs (viz. Aadhaar Card, Voter Card, PAN Card, Passport, Driving Licence, Educational Institution/Office ID Card or any other Photo ID Proof issued by Central/State Government) at the time of filling up of the Detailed Application Form and it would be required to carry the same to the Examination Venues along with the e-Admit Cards in support of their identities.
- 4.3. THE CANDIDATES SHOULD NOTE THAT UNDER NO CIRCUMSTANCES WILL THEY BE ALLOWED TO CHANGE IN CENTRE, OPTIONAL SUBJECT, INDIAN LANGUAGE PAPER (PAPER-A) AND MEDIUM OF EXAMINATION THEY HAVE ALREADY INDICATED IN THEIR FILLED ONLINE CS (P) APPLICATION FORM.
- 4.4. NO REQUEST FOR WITHDRAWAL OF CANDIDATURE RECEIVED FROM A CANDIDATE AFTER HE / SHE HAS SUBMITTED HIS/HER APPLICATION WILL BEENTERTAINED.

#### 5 FEE:

Candidates applying (Except Female/SC/ST/PwBD candidates who are exempted from payment of fee) for Civil Services (Main) Examination are required to pay a fee of Rs.200/- (Rupees Two Hundred only) either by depositing the money in any Branch of SBI by cash, or by using Net Banking facility of SBI or by using Visa/Master/RuPayCredit/Debit card.

Applicants who opt for "Pay by Cash" mode should print the system generated Pay-in-slip during filling of payment mode of Detailed Application Form and deposit the fee at the counter of SBI Branch on the next working day only. "Pay by Cash" mode will be deactivated on 5th August, 2018 i.e. one day before the closing date; however applicants who have generated their Pay-in-Slip before it is deactivated may pay at the counter of SBI Branch during banking hours on the closing date. Such applicants who are unable to pay by cash on the closing date i.e. during banking hours at SBI Branch, for reasons, whatsoever, even if holding valid pay-in-slip will have no other offline option but to opt for available Online Debit/Credit Card or Internet Banking payment mode on the closing date i.e. till 1800 hours of 6th August, 2018.

For the applicants in whose case payments details have not been received from the bank, they will be treated as fictitious payment cases and a list of all such applicants shall be made available on the Commission's website within two weeks after the last day of submission of Online Detailed Application Form. These applicants shall also be intimated through e-mail to submit copy of proof of their payment to the Commission at the address mentioned in the e-mail. The applicant shall be required to submit the proof within 10 days from the date of such communication either by hand or by speed post to the Commission. In case, no response is received from the applicants, **THEIR** SUMMARILY **APPLICATIONS** SHALL  $\mathbf{BE}$ **REJECTED** AND NO **FURTHER** CORRESPONDENCE SHALL BE ENTERTAINED IN THIS REGARD.

All female candidates and candidates belonging to Scheduled Castes/Scheduled Tribes/ Persons with Benchmark Disability categories are not required to pay any fee. No fee exemption is, however, available to OBC candidates and they are required to pay the full prescribed fee.

Persons with Benchmark Disability are exempted from the payment of fee, provided they are otherwise eligible for appointment to the Services/Posts to be filled on the results of this examination on the basis of the standards of medical fitness for these Services/Posts (including any concessions specifically extended to the Persons with Benchmark Disability). A candidate belonging to Persons with Benchmark Disability category claiming age relaxation/fee concession will be required to **upload** along with his/her Detailed Application Form scanned Certificate of Disability from a Government Hospital/Medical Board in support of his/her claim of belonging to Persons with Benchmark Disability Category as per norms.

NOTE I: NOTWITHSTANDING THE AFORESAID PROVISION FOR AGE RELAXATION/FEE EXEMPTION, A CANDIDATE BELONGING TO PERSONS WITH BENCHMARK CATEGORY WILL BE CONSIDERED TO BE ELIGIBLE FOR APPOINTMENT ONLY IF HE/SHE (AFTER SUCH PHYSICAL EXAMINATION AS THE GOVERNMENT OR THE APPOINTING AUTHORITY, AS THE CASE MAY BE, MAY PRESCRIBE) IS FOUND TO SATISFY THE REQUIREMENTS OF PHYSICAL AND MEDICAL STANDARDS FOR THE CONCERNED SERVICES/POSTS TO BE ALLOCATED TO CANDIDATES BELONGING TO THE PERSONS WITH BENCHMARK CATEGORY BY THE GOVERNMENT.

NOTE II: APPLICATIONS WITHOUT THE PRESCRIBED FEE (UNLESS REMISSION OF FEE IS CLAIMED) SHALL BE SUMMARILY REJECTED.

## NOTE III: FEE ONCE PAID SHALL NOT BE REFUNDED UNDER ANY CIRCUMSTANCES NOR CAN THE FEE BE HELD IN RESERVE FOR ANY OTHER EXAMINATION OR SELECTION.

- 6. Candidates are advised to read carefully the Rules of Civil Services Examination, 2018 which include the detailed scheme of the examination, as published in Part I Section 1 of the Govt. of India Gazette of India (Extraordinary) dated 7<sup>th</sup> February, 2018. THEY SHOULD NOTE THAT NO CORRESPONDENCE WILL BE ENTERTAINED BY THE COMMISSION FROM CANDIDATES TO CHANGE ANY OF THE ENTRIES MADE IN DAF.THEY SHOULD, THEREFORE, TAKE SPECIALCARE TO FILL UP THE APPLICATION FORM CORRECTLY. NO COLUMN OF THE APPLICATION FORM SHOULD BE LEFT BLANK.
- 7. If any candidate appears, —
- (i) at a centre other than the one indicated by the Commission in his/her e-Admit Card; or
- (ii) in an optional subject other than the one indicated by the Commission in his /her e-Admit Card; or
- (iii) in an Indian language paper other than the one indicated by the Commission in his e-Admit Card.

PAPERS OF SUCH A CANDIDATE WILL NOT BE VALUED, AND THE CANDIDATURE WILL BE LIABLE TO BE CANCELLED.

7.1. The online submission of the DAF and the duly filled in OBC proforma (applicable for OBC non-creamy layer candidates) alongwith the uploaded documents will be acknowledged electronically by sending email by the Commission. Incomplete Detailed Online application or DAF and the online OBC Annexure which have not been submitted within prescribed time limit or is incorrectly filled in or gives wrong code numbers in any of the columns is liable to be rejected. The candidates must ensure that they upload all the requisite documents before finally submitting the DAF and the OBC proforma online. The candidate should contact the Commission, through email <a href="web-upsc@gov.in">web-upsc@gov.in</a> or 011-23385271 in case of any assistance regarding filling up the Detailed Application Form.

The e-admit cards will be uploaded in the Commission's website. The candidates should download the same and check it carefully to ensure that the particulars on the e-Admit Card are correct. In case, there is any mistake in the e-Admit Card, it should be brought to the notice of the Commission with a request to issue the correct e-Admit Card. Candidates may note that they will not be allowed to take the examination on the strength of e-Admit Card issued in respect of another candidate. No candidate will be allowed to take the examination without the e-admit card.

- **8.** All the candidates who qualify for Personality Test/Interview on the basis of Result of Civil Services (Main) Examination, 2018 will be required to submit their Order of Preferences for Zone(s)/State(s) Cadre (for IAS/IPS) through an Addendum to the Detailed Application Form. This addendum to DAF will be made available to the qualified candidates of written examination of Civil Services (Main) Examination, 2018.
- 9. All the candidates who qualify for Personality Test/Interview on the basis of Result of Civil Services (Main) Examination, 2018 will be required to submit their Order of Preferences for Participating Services through an Addendum to the Detailed Application Form. This addendum to DAF will be made available to the qualified candidates of written examination of Civil Services (Main) Examination, 2018

- 10. The information earlier given by candidates in the application form for the Preliminary Examination will be cross-checked with the information given by them in the application form for the Main Examination. If there are any serious discrepancies, candidates are liable to be refused admission to the Main Examination in such cases.
- 11. The Roll No. of the candidate for the Main Examination will be the same as the Roll Number given to him/ her for the Preliminary Examination.
- 12. A candidate must <u>upload</u> along with DAF a scanned copy of the relevant certificate showing that he has one of the qualifications prescribed in <u>Rule 7 of CSE Rules, 2018</u>. The certificate uploaded must be one issued by the Competent Authority (i.e. University or other examining body) awarding the particular qualification. Attention is invited to Notes I and IV under **Rule 7 of the** Rules for the Civil Services Examination **2018**. All candidates who are declared qualified by the Commission for taking the Civil Services (Main) Examination should require to upload the proof of passing the requisite **minimum educational qualification** along with their application for the Main Examination failing which such candidates will not be admitted to the Main Examination and their candidature will be cancelled. (**Please refer Rule 7 of CSE Rules, 2018**)
- 13. Persons in Government service whether in a permanent or temporary capacity or as work charged employees other than casual or daily rated employees or those serving under Public Enterprises are required to **upload** an undertaking (as in the **Declaration in the Detailed Application Form**) that they have informed in writing their Head of Office/ Department that they have applied for the Examination. Candidates should note that in case a communication is received from their employer by the Commission withholding permission to the candidates applying for/ appearing at the Examination, their applications will be liable to be rejected/candidature will be liable to be cancelled. **(Please refer Rule 10 of CSE Rules, 2018)**

## The form of the Undertaking to be uploaded by the candidate:

| <u>UNDERTAKING'A'</u> (for Government Employees)  I have intimated my Head of Office / Department in writing on applied for the Civil Services Examination, 2018. | that I have |
|---|-------------|
| Name:Roll N   | (Signature) |

NOTE: All candidates in Government service, whether in a permanent or in temporary capacity or as work charged employee, other than casual or daily rated employees or those serving under Public Enterprises will be required to submit an undertaking that they have informed in writing their Head of Office/Department that they have applied for the Examination. Candidates should note that in case a communication is received from their employer by the Commission withholding permission to the candidates applying for appearing at the examination, their applications will be liable to be rejected/candidature will be liable to be cancelled.

- 14. A candidate appearing in the examination should also bring with him/ her to the examination hall extra copies of the photograph similar to the one uploaded in the application form.
- 15. A candidate who claims to belong to one of the Scheduled Castes/Scheduled Tribes or the Other Backward Classes(OBCs) should **upload** in support of his/her claim

a scanned copy of the certificate in the form given below from the District Officer or the Sub-Divisional Officer or any other Officer as indicated below, of the district in which his/her parents (or surviving parent) ordinarily reside, who has been designated by the State Government concerned as competent to issue such a certificate. If both his/her parents are deceased, the officer signing the certificate should be of the district in which candidate himself/herself ordinarily resides otherwise than for the purpose of his/her own education.

- Note 1: Candidates should note that their SC/ST/OBC/PwBD/Ex-servicemen certificate should be earlier than the closing date of application for Civil Services (Preliminary) Examination, 2018 [i.e. prior to 06.03.2018] as prescribed in the Rule 24 of the rules for the examination.
- Note 2: Candidates claiming to belong to OBCs should note that the name of their caste (including its spellings) as indicated in their certificates, should be exactly the same as published in the lists notified by the Central Government from time to time. A certificate containing any variation in the caste name will not be accepted.
- **Note 3:** The OBC claim of a candidate will be determined in relation to the State (or part of the State) to which his father originally belongs. A candidate who has migrated from one State (or part of the State) to another should, therefore, produce an OBC certificate which should have been issued to him based on his father's OBC certificate from the State to which he (father) originally belongs.
- **Note 4:** No change in the community status indicated by a candidate in his/her application form for the Civil Services (Preliminary) Examination will ordinarily be allowed by the Commission.
- 16. A candidate must upload with his/her application a scanned copy of certificate of age (indicating his date of birth) (Please refer Para regarding proof of Date of Birth below Note IV under Rule 6 of CSE Rules, 2018).

<u>Note</u>: The date of birth, accepted by the Commission is that entered in the Matriculation or Secondary School Leaving Certificate or in a certificate recognised by an Indian University as equivalent to Matriculation or in an extract from a Register of Matriculates maintained by a University which extract must be certified by the proper authority of the University or in the Higher Secondary or an equivalent examination certificate. These certificates are required to be submitted only at the time of applying for the Civil Services (Main) Examination. No other document relating to age like horoscopes, affidavits, birth extracts from Municipal Corporation, Service records and the like will be accepted. The expression Matriculation/Higher Secondary Examination Certificate in this part of the Instruction include the alternative certificates mentioned above.

- 17(i) A candidate claiming age-relaxation as a domicile of the State of Jammu and Kashmir should **upload** a scanned copy of the certificate from the District Magistrate in the State of Jammu and Kashmir within whose jurisdiction he had ordinarily resided or from any other authority designated in that behalf by the Government of Jammu and Kashmir to the effect that he had ordinarily been domiciled in the State of Jammu and Kashmir during the period from the 1st January,1980tothe31stdayofDecember,1989.
- (ii) A candidate disabled while in the Defence Services claiming age concession should **upload/**produce certified copy of the certificate in the form prescribed below from the Director General Resettlement, Ministry of Defence to certify that he was disabled while in the Defence Services in operations during hostilities with any foreign country or in a disturbed area and released as a consequence thereof.

## THE FORM OF CERTIFICATE TO BE PRODUCED BY THE CANDIDATE-

| Certified that rank                       | : No Shri   |  | _of Unit was disabled     |
|---|---|--|---------------------------|
|   | ce Services in operation  |  |                           |
|   | and was released as a re  |  | 3,                        |
|   |   |  |                           |
|   |   | Signature  |                           |
|   |   | Designation  | on                        |
|   |   | Date   |                           |
| *Strike out whichev                       | ver is not applicable.  |  |                           |
| concession in terr<br>produce an atteste  | including Commission on the control of Rule 6(b)(iv)or6(b) ed/certified copy of the com the authority conce | o)(v)of the Rules for the<br>e certificate as applicat | e Examination should      |
| (A)FORM OF CERT                           | IFICATE APPLICABLE F  | OR RELEASED/RETIREI                                    | O PERSONNEL.              |
| It is certifie                            | ed that NoR   | ank Name   | whose date                |
|   | has rendered  |  |                           |
| Army/Navy/Air For                         | rce and he fulfils ONE o  | f the following condition                              | :<br>is:                  |
| (a) Has non-doned fir                     |   | r comics and been been                                 | malaaaad am aammalatiam   |
| ` '                                       | ve or more years military   |  | -                         |
| _   | herwise than (i) by wa<br>ficiency; or (ii)*on his ow   | -  | charge on account of      |
| 4 4                                       |   |  |                           |
| (b) Has been releas<br>on invalidment on- | sed on account of physic  | cal disability attributab                              | le to military service or |
| on mvandmem on-                           |   | Name   | and Designation of the    |
|   |   |  | ompetent Authority seal   |
| *Applicable only to                       | persons released on or  |  | impetent Addiority seal   |
| (B)FORM OF CER                            | TIFICATE FOR SERVIN   | G PERSONNEL  |                           |
| (Applicable for serv                      | ring personnel who are d  | lue to be released within                              | n one year).              |
|   | y that, according to the<br>Name  | is serving in the                                      | Army/Navy/Air Force       |
| from                                      |   | and is due to co                                       | omplete the specified     |
| term of his engager                       | ment with the Armed   | Forces on the da                                       | ate                       |
| Place: Sign                               | nature of Commanding C  | Officer  |                           |
| Date:                                     | Office Seal   |  |                           |
| 0   | . Campialaina   | (D) on oboss!!! 1:                                     | 40 mino 410 - f-11'       |
| undertaking:—                             | s furnishing certificate  | (b) as above will have                                 | to give the following     |
|   |   |  |                           |

## UNDERTAKING TO BE GIVEN BY THE CANDIDATE

I understand that if selected on the basis of the recruitment/Examination to which this application relates, my appointment will be subject to my producing documentary evidence to the satisfaction of the appointing authority that I have been duly released/retired/discharged from the Armed Forces and that I am entitled to the benefits admissible to Ex-servicemen in terms of the Ex-servicemen (Re-employment in Central Civil Services and Posts) Rules, 1979, as amended from time to time.

| Place:   |  |
|--|--|
| Date:  | Signature of Candidate   |
| • •  | OF CERTIFICATE APPLICABLE FOR SERVING ECOs/SSCOs WHO HAVE COMPLETED THEIR INITIAL ASSIGNMENT AND ARE ONE EXTENDED IT.  |
| It is cer  | tified that No Rank Namewhose date of birth isis serving in the Army/Navy/Air Force from_  |
|  | as already completed his initial assignment of five years onand is on signment till  |
|  | no objection to his applying for civil employment and he will be released nths' notice on selection from the date of receipt of offer of appointment.  |
| Station:   |  |
| Date:<br>Authori   | Name and Designation of the<br>Competent Authority<br>SEAL<br>ties who are competent to issue certificates are as follows:   |
| Secretary's I<br>Navy—Direc                                    | case of Commissioned Officers including ECOs/SSCOs. Army— Military Branch, Army Hqrs., New Delhi. torate of Personnel, Naval Hqrs., New Delhi. Directorate of Personnel (Officers), Air Hqrs., New Delhi.  |
| (b) In case of   | f JCO/ORs and equivalent of the Navy and Air Force.  |
| Army— By v   | various Regimental Record Offices. Navy—CABS, Bombay.  |
| Air Force—   | Air Force Records NERW, New Delhi.   |
| Language w<br>of Arunacha<br>Accor<br>effect from<br>SC/ST/OBC | <b>nption from Paper A on Indian Language</b> : The paper-A on Indian will not, however, be compulsory for candidates hailing from the States al Pradesh, Manipur, Meghalya, Mizoram, Nagaland and Sikkim. Indiangly, such candidates will be required to <b>upload</b> a certificate to that the same authorities as are empowered, to issue certificates in regard to a candidates (see para <b>15</b> above). These certificates will have to be issued by the number of the above States only. |
| The for  | m of the certificate will be as under: —   |
| Shri   | is to certify that Shri/Shrimati/Kumari* son/daughter* ofVillage/Town*in District/Division*  |
| Date   |  |
| Place  | <u> </u>   |
|  | te the words which are not applicable.<br>The names of States not applicable.  |

18.1 The paper A on Indian Language will not, however, be compulsory for candidates of Persons with Benchmark Disability (only Hearing Impaired) provided that they have been granted such exemption from 2<sup>nd</sup> or 3<sup>rd</sup> language courses by the concerned education Board/University. The candidate needs to provide an undertaking/self-declaration in this regard in order to claim such exemption. The format of declaration/under-taking is given as under:

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#### **UNDERTAKING 'B'/SELF-DECLARATION**

I seek to avail the exemption from appearing in Indian Language Paper A of Civil Services (Main) Examination. I have been granted such exemption from 2<sup>nd</sup> or 3<sup>rd</sup> language courses by the .......(Education Board)/...... (University).

I have read the Rules of Civil Services Examination, 2018 and aware of the Rule that Such exemption from appearing at INDIAN LANGAUGE FOR PAPER A is permissible to those Hard of Hearing candidates with Benchmark Disability who have been granted such exemption from  $2^{nd}$  or  $3^{rd}$  language courses by the concerned education Board/University.

|       |          | (Signature) |
|-------|----------|-------------|
| Name: |          |             |
|       | Roll No. |             |

- 19. A candidate belonging to Persons with Benchmark Disability category shall be required to meet one or more of the physical requirements/abilities, as laid down in Rule 22 of the Rules for the Civil Services Examination, **2018** and **upload** scanned Certificate of Disability in Form V / Form VI / Form VII/ Others issued by notified Medical Authority of the Central/State Government. Such Disability Certificate should be of a date prior to the closing date for submission of online application form for Civil Services (Preliminary) Examination 2018 (i.e. prior to 06.03.2018) as prescribed in Rule 24 of the Rules of the examination.
- 20A. The Visually Impaired category candidates as well as Orthopedically Handicapped candidates with locomotor disability and cerebral palsy where dominant (writing) is affected to the extent of slowing the performance of function (minimum of 40% impairment) appearing in the Civil Services (Main) Examination, **2018** will be allowed Compensatory time of 20 minutes per hour. Thus, these candidates will be allowed compensatory time of 60 minutes for each paper which will be over and above the duration of 3 hours per paper applicable to all other candidates.
- 20B. The Visually Impaired candidates and LDCP candidates eligible for scribe are required to indicate their option for scribe facilities & provide details in column 9(d) of DAF.
- 21. Detailed Application Form submitted online without the uploaded scanned copies of the required/prescribed documents are liable to be summarily rejected.
- 22. Candidates must note that they use only international form of Indian numerals in the filling of the applicationformandwritingtheCodeNumberse.g.1,2,3,4, 5,6,etc.Only the Code Numbers as thus filled in will be taken into account. They should take special care to see that the entries made in the application form are correct and true. In case there are any misleading entries, the candidates will responsible for the consequences thereof.
- 23. E-Admit Card issued for admission to the Main Examination are liable to be cancelled, at the discretion of the Commission for valid reasons such as misrepresentation or serious deficiencies in the candidature of the candidate.

24.(i)Candidates should note that name, roll no., email and mobile number of the candidate and data of Col: 1(a), 1(b),3, 8(a), 8(c), 8(d), 8(e), 9(a), 9(b), 9(c), 10, 11, 12(a), 12(b),13(a), 13(b) & 22 are pre-populated and have been taken from the data filled up by the candidates at the time of filling up of on-line application form for Civil Services (Preliminary) Examination -2018 and no change is permitted in any of these columns in the Detailed Application Form.

(ii)In respect of Sindhi language they have to clearly indicate in words whether they will write Sindhi in Devanagari script or Arabic script. Similarly for Santhali language candidates should clearly indicate whether they will write Santhali in Devanagari or Olchiki script. Candidates may also note that the question papers of Santhali language will be printed in Devanagari script only.

- 25. Candidates are required to indicate in the relevant column of Col.12 of the application form about the language medium in which they would like to be interviewed at the time of Interview for Personality Test as below (Please refer Rule 15(2) of CSE Rules, 2018):-
- (a) The candidates, opting for Indian Language medium for the written part of the Civil Services (Main) Examination, may choose either the same Indian Language or English or Hindi as the medium for the interview.
- (b) The candidates, opting to write the Civil Services (Main) Examination in English, may choose as the medium for interview either English, or Hindi, or any other Indian Language opted by them for the compulsory Indian Language Paper in the written part of the Civil Services (Main) Examination. However, the candidates, who are exempted from the compulsory Indian Language Paper, will have to choose either English or Hindi as medium of Interview for Personality Test.
- 26. Candidates should note that instead of separate Question Paper and answer book, a consolidated <u>Question Paper-cum-Answer book (QCAB)</u>, having space below each part/sub part of a question shall be provided to them for writing the answers. Candidates shall be required to attempt answer to the part/sub-part of a question strictly within the pre-defined space. Any attempt outside the pre-defined space shall not be evaluated. <u>Marks may be deducted as PENALTY for violating any of the instructions contained in the QCAB</u>.
- 27. Candidates should note that in no circumstances will they be allowed a change in the language medium of Interview for Personality Test which they have indicated in their Application Form for the Main Examination.
- 28. Candidates should note that evaluation of the papers, namely, Essay, General Studies and Optional Subject of all the candidates would be done simultaneously along with evaluation of their qualifying papers on 'Indian Languages' and 'English' but the papers on Essay, General Studies and Optional Subject of only such candidates will be taken cognizance who attain 25% marks in Indian Language and 25% marks in English as minimum qualifying standards in these qualifying papers.
- 29. In all communication with the Commission regarding his/her application the candidate should mention the name of the Examination, his/her Roll Number, Name and his/her Date of birth.

A candidate must see that communication sent to him at the address stated in his application is redirected, if necessary. Any change in address should be communicated to the Commission at the earliest opportunity. Although the Commission makes every effort to take account of such changes, they can not accept any responsibility in the matter.

- 30. The Candidates should note that their candidature at all the stages of the Civil Services(Main) Examination will be purely provisional, subject to their satisfying the prescribed eligibility conditions. If onverification at any stage before or after the Main (Written) examination and Interview Test, it is found that they do not fulfill a ny of the eligibility conditions; their candidature for the examination will be cancelled by the Commission.
- 31. Documents to be scanned and uploaded while submitting the Detailed Application Form on the website of the Commission by the candidate are as follows:
- (1) Scanned Copy of proof of date of birth as prescribed in Para below Note IV under Rule 6 of the rules for the exam. [Col. 1 (a) of DAF]
- (2) <u>Scanned Copy of certificate in support of claim for age relaxation (where applicable) [Col. 1</u> (c) of DAF]
- (3) Scanned Copy of Certificate in support of claim to belong to SC / ST / OBC (where applicable), (ANNEXURE VI (UNDERTAKING FOR OBC CANDIDATES) AND ANNEXURE VII (OBC ANNEXURE) may be filled online by OBC candidates) [Col. 8(a) of DAF]
- (4) Scanned Copy of certificate in support of claim to being PwBD. [Col. 9 of DAF]
- (5) <u>Scanned copy of Hailing Certificate to show that the candidate hails from Arunachal Pradesh/ Manipur/ Meghalaya/ Mizoram/ Nagaland or Sikkim (Where applicable)</u>
- (6) Scanned copy of an Undertaking 'B'/self-declaration by those Hard of Hearing candidates with Benchmark Disability who have been granted such exemption from 2<sup>nd</sup> or 3<sup>rd</sup> language courses by the concerned education Board/University and who are availing the Exemption from appearing in Indian Language Paper A . [Ref. para 18(1) of the Instructions to candidates annexed]
- (7) <u>Scanned Copy of the certificate of educational qualifications (including a copy of recognition letter / equivalence certificate from AIC/UGC, if applicable) [Col. 14 of DAF]</u>
- (8) Scanned copy of documentary proof in support of service/status/land holding/income from different sources/property held by parents of OBC (non- creamy layer) candidates.

  [ANNEXURE VI (UNDERTAKING FOR OBC CANDIDATES) AND ANNEXURE VII (OBC ANNEXURE) of DAF]
- (9) Any of the following Photo ID Proofs (viz. Aadhaar Card, Voter Card, PAN Card, Passport, Driving License, Educational Institution/Office ID Card or any other Photo ID Proof issued by Central/State Government.)
- (10) <u>Undertaking "A" for Government employees in the prescribed format annexed with Instructions to Candidates. [Ref. Col. 15(i) of DAF and Para 13 of the Instructions to the candidate]</u>

NOTE: CANDIDATES QUALIFIED FOR INTERVIEW FOR THE PERSONALITY TEST ON THE RESULTS OF THE WRITTEN PART OF THE MAIN EXAMINATION WILL BE REQUIRED TO <u>PRODUCE</u> THE ORIGINALS OF THE CERTIFICATES MENTIONED ABOVE. FAILURE TO SUBMIT THE REQUIRED CERTIFICATES IN ORIGINAL AT THAT TIME WILL ENTAIL CANCELLATION OF CANDIDATURE.

## I Column 5 of the Application Form — CITIZENSHIP STATUS

Code Description

- 1 -a citizen of India.
- 2 -a subject of Nepal.
- 3 -a subject of Bhutan.
- 4 a Tibetan refugee who came over to India before the 1st January, 1962, with the intention of permanently settling in India.

5 -a person of Indian origin who has migrated from Pakistan, Burma, Sri Lanka, East African countries of Kenya, Uganda, the United Republic of Tanzania, Zambia, Malawi, Zaire and Ethiopia and Vietnam with the intention of permanently settling in India. (Please refer Rule 5 of CSE Rules, 2018)

## (A) The form of certificate to be produced by Scheduled Castes/Scheduled Tribes candidates applying for appointment to posts under the Government of India.

'This is to certify that Shri/Shrimati/Kumari\*
......son/daughter\*of......of village/town \* ......in
District/Division\*.....of the State/Union Territory\*
......belongs to ......the
caste/tribe\* which is recognized as Scheduled Caste/Scheduled Tribe\* under:—

The Constitution (Scheduled Castes) Order, 1950@.

The Constitution (Scheduled Tribes) Order, 1950@.

The Constitution (Scheduled Castes) (Union Territories) Order, 1951@.

The Constitution (Scheduled Tribes)(Union Territories) Order, 1951@. [as amended by the Scheduled Castes and Scheduled Tribes List(Modification) Order,1956; the Bombay Reorganization Act, 1960; the Punjab ReorganizationAct,1966; the State of Himachal Pradesh Act,1970; and the North Eastern Areas (Reorganization) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act,1976, the State of Mizoram Act,1986 the State of Arunachal Pradesh Act,1986 and the Goa, Daman and Diu(Reorganization)Act,1987.]

The Constitution (Jammu and Kashmir) Scheduled Caste Order, 1956(a).

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 Castes Order, 1962.@

the Constitution (Dadra and Nagar Haveli) Scheduled Tribes Order, 1962.@

the Constitution(Pondicherry) Scheduled Castes Order, 1964.@

the Constitution (Uttar Pradesh) Scheduled Tribes Order, 1967.@

the Constitution (Goa, Daman and Diu) Scheduled Castes 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) Order (Amendment) Act, 1990.@

the Constitution (ST) Order (Amendment) Act, 1991.@

the Constitution(ST) Order (Second Amendment) Act, 1991.@

the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 2002.@

the Constitution (Scheduled Castes) Order( Amendment) Act, 2002.@

the Constitution(Scheduled Castes and Scheduled Tribes) Orders(Amendment)Act,2002.@

| %2. Applicable in the case of Scheduled Castes/Scheduled Tribes persons who have migrated from one State/Union Territory Administration to another.  |
|--|
| This certificate is issued on the basis of the Scheduled Castes/ Scheduled  certificate* issued to Shri/Shrimati* father/mother of  Shri / Shrimati / Kumari* of village/ town*  in District / Division*  of the State / Union Territory*  who belongs to the caste / tribe* which is recognised as a Scheduled Caste/Scheduled Tribe* in the State/Union Territory. issued by the dated  %3. Shri/Shrimati/Kumari* and /or* his/her* family ordinarily reside(s) in village/. town* of the State/Union Territory* of  Signature |
| Place:   |
| State/Union Territory *  Date:   |
| *Please delete the words which are not applicable.  @ Please quote specific Presidential order.  |
| %Delete the paragraph which is not applicable.   |
| <b>NOTE:</b> The term "Ordinarily reside(s)" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.  |
| ** List of authorities empowered to issue Scheduled Caste/Scheduled Tribe/OBC Certificates.  |
| (I ) District Magistrate/Additional District Magistrate/ Collector/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector/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 Officers not below the rank of Tehsildar.  |
| (iv) Sub Divisional Officer of the area where the candidate and/or his family normally resides.  |
| (B) The form of certificate to be produced by Other Backward Classes candidates applying for appointment to posts under the Government of India.   |
| This is to certify that Shri/Shrimati/Kumari*son/daughter* of Shri of village/town* in District /  |

The Constitution (Scheduled Castes) Orders(Second Amendment) Act,2002.@

| Division*: |           | of the State/Ui     | nion Territory* |                  | belongs | tc |
|------------|-----------|---------------------|-----------------|------------------|---------|----|
| the        | community | which is recognized | l as a backwa   | rd class under:— |         |    |

- @Government of India, Ministry of Welfare Resolution No.12011/68/93-BCC(C) dated 10<sup>th</sup> September, 1993 published in the Gazette of India Extraordinary Part I, Section I, No. 186 dated the 13<sup>th</sup> September, 1993.
- @Government of India, Ministry of Welfare Resolution No.12011/9/94-BCC dated 19-10-94, published in the Gazette of India Extra ordinary Part I, Section I, No.163dated20-10-1994.
- @Government of India, Ministry of Welfare Resolution No.12011/7/95-BCC dated 24-5-95, published in the Gazette of India Extraordinary Part I, Section I, No. 88 dated 25-5-1995.
- @Government of India, Ministry of Welfare Resolution No. 12011/96/94-BCC dated 9th March, 1996 published in Gazette of India Extraordinary Part I, Section I, No. 60 dated 11<sup>th</sup> March, 1996.
- @ Government of India, Ministry of Welfare Resolution No.12011/44/96-BCC dated 6<sup>th</sup> December, 1996 published in the Gazette of India Extraordinary Part I, Section I, No. 210 dated 11<sup>th</sup> December, 1996.
- @ Government of India, Ministry of Welfare Resolution No.12011/13/97-BCC dated  $3^{\rm rd}$  December, 1997 published in the Gazette of India Extraordinary Part-I, Section-I, No.239 dated the  $17^{\rm th}$  December, 1997.
- @ Government of India, Ministry of Welfare Resolution No.12011/99/94-BCC dated the  $11^{th}$  December, 1997 published in the Gazette of India Extraordinary Part I, Section I, No.236 dated the  $12^{th}$  December, 1997.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/68/98-BCC dated the 27th October, 1999 published in the Gazette of India Extraordinary Part I, Section I, No. 241 dated the 27th October, 1999.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No. 12011/88/98-BCC dated the 6th December, 1999 published in the Gazette of India Extraordinary Part I, Section I, No. 270 dated the &December, 1999.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No. 12011/36/99-BCC dated the 4th April, 2000 published in the Gazette of India Extraordinary Part I, Section I, No. 71 dated the 4th April, 2000.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/44/99-BCC dated the 21st September, 2000 published in the Gazette of India Extraordinary Part I, Section I, No.210 dated the 21st September, 2000.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No. 12015/9/2000-BCC dated the  $6^{th}$  September, 2001 published in the Gazette of India Extraordinary Part I, Section I, No. 246 dated the  $6^{th}$  September, 2001.
- @Government of India. Ministry of Social Justice and Empowerment Resolution No. 12011/1/2001-BCC dated 19th June, 2003 published in the Gazette of India Extraordinary Part I, Section I, No. 151 dated  $20^{th}$  June, 2003.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No. 12011/4/2002-BCC dated 13th January, 2004 published in the Gazette of India Extraordinary, Part I, Section I, No.9 dated 13th January, 2004.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No. 12011/9/2004-BCC dated 16th January, 2006published in the Gazette of India Extraordinary, Part I, Section I, No. 10 dated  $16^{\rm th}$  January, 2006.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No. 12011/14/2004-BCC dated 12th March, 2007 published in the Gazette of India Extraordinary, Part I, Section I, No. 67 dated 12th March, 2007.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No. 12015/2/2007-BCC dated  $18^{th}$  August, 2010 published in the Gazette of India Extraordinary, Part I, Section I, No. 232 dated  $18^{th}$  August, 2010.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No. 12015/2/2007-BCC dated  $11^{th}$  October, 2010 published in the Gazette of India Extraordinary, Part I, Section I, No. 274 dated  $12^{th}$  October, 2010.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No. 12015/15/2008-BCC dated  $16^{th}$  June, 2011 published in the Gazette of India Extraordinary, Part I, Section I, No. 123 dated  $16^{th}$ June, 2011.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No. 12015/13/2010-BC-II dated 8<sup>th</sup> December, 2011 published in the Gazette of India Extraordinary, Part I, Section I, No. 257 dated 08<sup>th</sup> December, 2011.
  - @ Government of India, Ministry of Social Justice and Empowerment Resolution No.

12015/05/2011-BC-II dated the 17th February, 2014 published in the Gazette of India Extraordinary, Part I, Section I, No.47 the 17th February, 2014.

- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/04/2014-BC-II dated the 14<sup>th</sup> January, 2015 published in the Gazette of India Extraordinary Part-I, Section-1, No.16 dated the 14<sup>th</sup> January, 2015.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/07/2014-BC-II dated the 23<sup>rd</sup> January, 2015 published in the Gazette of India Extraordinary Part-I, Section-1, No.26 dated the 23<sup>rd</sup> January, 2015.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/01/2015-BC-II dated the 27<sup>th</sup> May, 2015 published in the Gazette of India Extraordinary Part-I, Section-1, No.144 dated the 27<sup>th</sup> May, 2015.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.12015/05/2011-BC-II dated the 14<sup>th</sup>July, 2015 published in the Gazette of India Extraordinary Part-I, Section-1, No.191 dated the 15<sup>th</sup> July, 2015.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/06/2014-BC-II dated the 09<sup>th</sup>September, 2015 published in the Gazette of India Extraordinary Part-I, Section-1, No.234 dated the 09<sup>th</sup> September, 2015.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/13/2016-BC-II dated the 25<sup>th</sup> May, 2016 published in the Gazette of India Extraordinary Part-I, Section-1, No.160 dated the 26<sup>th</sup> May, 2016.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/14/2016-BC-II dated the 13<sup>th</sup>June, 2016 published in the Gazette of India Extraordinary Part-I, Section-1, No.188 dated the 15<sup>th</sup> June, 2016.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/15/2016-BC-II dated the 30<sup>th</sup>June, 2016 published in the Gazette of India Extraordinary Part-I, Section-1, No.206 dated the 30<sup>th</sup> June, 2016.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No. 12011/04/2014-BC-II dated the 11<sup>th</sup>August, 2016 published in the Gazette of India Extraordinary Part-I, Section-1, No.266 dated the 11<sup>th</sup> August, 2016.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/06/2014-BC-II dated the 06<sup>th</sup>December, 2016 published in the Gazette of India Extraordinary Part-I, Section-1, No.363 dated the 07<sup>th</sup> December, 2016.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/13/2016-BC-II dated the 22<sup>nd</sup>December, 2016 published in the Gazette of India Extraordinary Part-I, Section-1, No.374 dated the 22<sup>nd</sup> December, 2016.
- @ Government of India, Ministry of Social Justice and Empowerment Resolution No.20012/01/2017-BC-II dated the 18<sup>th</sup> January, 2017 published in the Gazette of India Extraordinary Part-I, Section-1, No.18 dated the 19<sup>th</sup> January, 2017.

| Shri/Smt./Kumari*                                     | and /or* his/her* family ordinarily         |
|---|---|
| reside(s) in village /town*                           | of District/Division* of the                |
| State/ Union Territory* of                            | This is also to certify that                |
| he/she* does not belong to the persons/ sections* (Cr | eamy Layer) mentioned in column 3 of the    |
| Schedule to the Government of India, Department of Pe | rsonnel & Training O.M. No. 36012/22/93-    |
| Estt.(SCT) dated 8-9-1993, O.M. No. 36033/3/2004- E   | Stt. (res.) dated 9th March, 2004 and O.M.  |
| 36033/3/2004-Estt.(Res) dated 14-10-2008 and O.M. No  | o. 36033/1/2013-Estt. (Res) dated 27th May, |
| 2013.   | ,     |
|   |   |
|   | Signature                                   |
|   | **Designation                               |
|   | (with seal of office)                       |
| Place   | ,   |
| Date  |   |
|   |   |

\*Please delete the words which are not applicable.

**Note:** The term "ordinarily reside(s)" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

\*\*List of Authorities empowered to issue Other Backward Classes certificate will be the same as those empowered to issue Scheduled Caste/Scheduled Tribe certificates.

@ Strike out whichever is not applicable.

## II. FORMAT OF UNDERTAKING TO BE FURNISHED BY OBC CANDIDATES. $\underline{\textbf{UNDERTAKING}}$

| "I,                    | son/daughter of           | Shri                   |                    | Resident      | of  |
|------------------------|---------------------------|------------------------|--------------------|---------------|-----|
|                        | city                      |                        |                    |               |     |
|                        | ereby declare that I belo |                        |                    |               |     |
| recognized as a back   | ward class by the Gover   | nment of India for     | the purpose of     | reservation   | in  |
| services as per orders | s contained in Departmen  | nt of Personnel and    | Training Office    | Memorandu     | ım  |
| No. 36012/22/93-Est    | tt.(SCT),dated 8.9.1993.  | It is also declared th | nat I have read ar | nd understo   | od  |
| the instructions men   | tioned in the said DOPT's | s Office Memorandı     | um dated 08.09.1   | 1993, and C   | )M  |
| No. 36033/1/2013-E     | stt.(Res.) dated 13.09.20 | 17 and I have reaso    | ns to declare tha  | at I do not f | all |
| under OBC (Creamy I    | Layer) category.          |                        |                    |               |     |
| *******                | *********                 | *******                | ******             | *****         | **  |

**Note:** Creamy layer clause in respect of OBC candidates must be as per OM No. 36033/1/2013-Estt (Res) dated 13/09/2017 (This Note is not part of the undertaking or OBC Certificate).

## FORM- IV

## Application for Obtaining Certificate of Disability by Persons with Disabilities [See rule 17(1)]

| 's Name :                         |   |   | (Middle Name)<br>Name:  |  |
|-----------------------------------|---|---|---|--|
|                                   |   | /   |   |  |
| t the time of a                   | (Date)  |   |   |  |
|                                   | application:  | (Month)   | (Year)<br>years   |  |
| Male/Female/7                     |   |   |   |  |
| ess:                              |   |   |   |  |
| ermanent addr                     | ess(b) Current  | Address (i.e. fo  | r communication)  |  |
|                                   |   |   |   |  |
| eriod since wh<br>tional Status ( | en residing at on please tick as a  | current address _<br>applicable)  |   |  |
|                                   |   | ,   |   |  |
| ,                                 |   |   |   |  |
| iv) Higher S                      | econdary  |   |   |  |
| ,                                 | nool  |   |   |  |
| vii) Primary                      |   |   |   |  |
| ,                                 |   |   |   |  |
| oation                            |   |   |   |  |
| fication marks                    | s (i)   |   | (ii)  |  |
| ture of disabil                   | ity:  |   |   |  |
| riod since wh                     | en disabled: Fro  | om Birth//since   | year  |  |
| Did you ever                      | apply for issue   | of a certificate  | of disability in the past   | _ yes/no   |
| (a) Authorit                      | ty to whom and  |   |   |  |
| ave you ever b                    | een issued a ce   | rtificate of disal  | oility in the past? If yes, plo   | ease enclose   |
|                                   | eriod since whational Status ( i) Post Gracii) Graduate ( iii) Diploma ( iv) Higher Solvi) Middle ( vii) Primary ( viii) Non-liter ( pation | eriod since when residing at cational Status (please tick as a ii) Post Graduate iii) Graduate iii) Diploma iv) Higher Secondary iv) High School vi) Middle vii) Primary viii) Non-literate bation fication marks (i) ture of disability: criod since when disabled: From Did you ever apply for issue ity of the primary for issue ity of the | eriod since when residing at current address ational Status (please tick as applicable)  i) Post Graduate ii) Graduate iii) Diploma iv) Higher Secondary v) High School vi) Middle vii) Primary viii) Non-literate bation fication marks (i) ture of disability: criod since when disabled: From Birth//since b Did you ever apply for issue of a certificate can Authority to whom and district in whice (b) Result of application ave you ever been issued a certificate of disability. | ermanent address (b) Current Address (i.e. for communication)  eriod since when residing at current address tional Status (please tick as applicable)  i) Post Graduate ii) Graduate iii) Diploma iv) Higher Secondary v) High School vi) Middle vii) Primary viii) Non-literate  pation  fication marks (i) |

other action as per law.

(signature or left thumb impression of person with disability, or of his/her legal guardian in case of persons with intellectual disability, autism, cerebral palsy and multiple disabilities, etc)

|                 |            |                   |             |                 |                            |                             |             | -                         | pilities, etc)  |    |
|-----------------|------------|-------------------|-------------|-----------------|----------------------------|-----------------------------|-------------|---------------------------|-----------------|----|
| Date:           |            |                   |             |                 |                            |                             |             |                           |                 |    |
|                 | Place:     |                   |             |                 |                            |                             |             |                           |                 |    |
|                 | Enclosures | :                 |             |                 |                            |                             |             |                           |                 |    |
|                 | 1. Pro     | oof of resi       | dence (P    | lease tic       | k as applica               | ıble).                      |             |                           |                 |    |
|                 | (a)        | ration ca         | rd,         |                 |                            | •                           |             |                           |                 |    |
|                 | , ,        | voter ide         | •           | d,              |                            |                             |             |                           |                 |    |
|                 | ` '        | driving 1         | -           |                 |                            |                             |             |                           |                 |    |
|                 |            | bank pas          |             |                 |                            |                             |             |                           |                 |    |
|                 | ` '        | PAN car passport, | -           |                 |                            |                             |             |                           |                 |    |
|                 |            |                   |             | city wa         | iter and any               | other utilit                | ty hill in  | dicatino                  | the address of  | γf |
|                 | (8)        | the appli         |             | orty, wa        | itor and any               | ouiei auni                  | ., 0111 111 | areating                  | , the address ( | ,1 |
|                 | (h)        |                   |             | sidence         | issued by a                | Panchayat,                  | municipa    | lity, can                 | ntonment board  | d, |
|                 |            | any gaze          | etted offic | cer, or tl      | ne concerne                | d Patwari o                 | r Head N    | laster of                 | f a Governme    | nt |
|                 |            | school,           |             |                 |                            |                             |             |                           |                 |    |
| ` /             |            | bility, a ce      | ertificate  | of reside       | ence from h                | persons with<br>ead of such |             | -                         | stitute, mental | ıy |
| D /             |            |                   |             | (For            | office use of              | only)                       |             |                           |                 |    |
| Date:<br>Place: |            |                   |             |                 | Sig<br>Sta                 | nature of iss               | suing autl  | hority                    |                 |    |
| (In             |            |                   |             | lete perr<br>[S | blindness)<br>See rule 18( | lysis of limb               |             |                           |                 |    |
| Certifi         | cate No.   |                   |             |                 |                            |                             | Date:       | photog<br>(Show)<br>only) | graph           |    |
|                 | This is    | to o              | certify     | that            | I have                     | carefully                   | exami       | ined S                    | Shri/Smt./Kun   | n. |
|                 |            |                   | -           |                 | daughter of                | •                           |             |                           | Date of Birt    | ih |
| •               | /IM/YY) _  |                   |             |                 |                            | e/female                    |             |                           | registratio     |    |
| No              |            | pern              | nanent 1    | resident        | of House                   | e No                        |             | _ Ward                    | d/Village/Stre  | et |

|        | Post                       | Office  | District                         | State -                       |
|--------|----------------------------|---|----------------------------------|-------------------------------|
|        | , whose pl                 | notograph is affixed above, a   | and am satisfied that:           | <del></del>                   |
| (A) he | e/she is a case of:        |   |                                  |                               |
| •      | locomotor disability       |   |                                  |                               |
| •      | dwarfism                   |   |                                  |                               |
| •      | blindness                  |   |                                  |                               |
|        | (Please tick as applical   | ole)  |                                  |                               |
| (B) th | e diagnosis in his/her cas | se is   |                                  |                               |
|        | otor disability/dwarfisn   | % (in figure)  n/blindness in relation to  er and date of issue of the gr | his/her (part of                 | ls) permanent<br>body) as per |
| 2.     | The applicant has subn     | nitted the following document   | nt as proof of residence:-       |                               |
|        | Nature of Document         | Date of Issue   | Details of authority certificate | issuing                       |
|        |                            |   |                                  |                               |

(Signature and Seal of Authorised Signatory of notified Medical Authority)

Signature/thumb impression of the person in whose favour certificate of disability is issued

## Form - VI

# Certificate of Disability (In cases of multiple disabilities)

[See rule 18(1)]

(Name and Address of the Medical Authority issuing the Certificate)

Recent passport size attested photograph (Showing face only) of the person with disability.

|             |  |                   |                    | with disability.                  |       |
|-------------|--|-------------------|--------------------|-----------------------------------|-------|
| Certificate |  |                   |                    | Date:                             |       |
| Th          | is is to certify   | that we           | have carefull      | y examined Shri/Smt./K            | um.   |
|             |  |                   | n/wife/daughter    |                                   | Shri  |
|             |  | Da                | te of Birth (DI    | D/MM/YY)                          | Age   |
| yea         | ors, male/female<br>on No<br>lage/Street, whose photograph | ·                 |                    |                                   |       |
| Registrati  | on No.   | perman            | ent resident of    | House No.                         |       |
| Ward/Vill   | lage/Street  | Post Offic        | ce                 | _ District S                      | State |
|             | , whose photograph   | is affixed abo    | ve, and am satisfi | ed that:                          |       |
| (A) he/s    | he is a case of M  | Iultiple Disal    | oility. His/her (  | extent of permanent phys          |       |
|             |  |                   |                    | number and date of is             |       |
|             |  | for the disabilit | ies ticked below,  | and is shown against the relevant | vant  |
|             | in the table below:  | 1                 | - ·                |                                   |       |
| S. No       | Disability   | Affected          | Diagnosis          | Permanent physical                |       |
|             |  | part of           |                    | impairment/mental                 |       |
|             |  | body              |                    | disability (in %)                 |       |
| 1.          | Locomotor disability                                       | @                 |                    |                                   |       |
| 2.          | Muscular Dystrophy   |                   |                    |                                   |       |
| 3.          | Leprosy cured  |                   |                    |                                   |       |
| 4.          | Dwarfism   |                   |                    |                                   |       |
| 5.          | Cerebral Palsy   |                   |                    |                                   |       |
| 6.          | Acid attack Victim   |                   |                    |                                   |       |
| 7.          | Low vision   | #                 |                    |                                   |       |
| 8.          | Blindness  | #                 |                    |                                   |       |
| 9.          | Deaf   | £                 |                    |                                   |       |
| 10.         | Hard of Hearing  | £                 |                    |                                   |       |
| 11.         |  |                   |                    |                                   |       |
|             | disability   |                   |                    |                                   |       |
| 12.         | Intellectual Disability                                    |                   |                    |                                   |       |
| 13.         | Specific Learning  |                   |                    |                                   |       |
|             | Disability   |                   |                    |                                   |       |
| 14.         | 1 1  |                   |                    |                                   |       |
|             | Disorder   |                   |                    |                                   |       |
| 15.         | Mental illness   |                   |                    |                                   |       |
| 16.         | Chronic Neurological                                       |                   |                    |                                   |       |
|             | Conditions   |                   |                    |                                   |       |
| 17.         | 1  |                   |                    |                                   |       |
| 18.         |  |                   |                    |                                   |       |
| 19.         | 1  |                   |                    |                                   |       |
| 20.         |  |                   |                    |                                   |       |
| 21.         | Sickle Cell disease  |                   |                    |                                   |       |

| (number and date of issu<br>In figures: per   | ue of the guidelines to be specified |  |
|---|--------------------------------------|--|
| 3. Reassessment of disability is  (i) not necessary,  | non-progressive/likely to improve    | not likely to improve.                   |
| or<br>(ii) is recommended/afte<br>shall be valid till   |                                      | nths, and therefore this certificate     |
| @ e.g. Left/right/bo<br># e.g. Single eye<br>£ e.g. Left/Right/bo<br>4.The applicant has submitted th | oth arms/legs                        | MM) (YY) `residence:-                    |
| Nature of document  | Date of issue                        | Details of authority issuing certificate |
| 5. Signature and seal of the  | Medical Authority.                   |  |
| Name and Seal of Member   | Name and Seal of Member              | Name and Seal of the<br>Chairperson      |
| Signature/thumb impression of the person in whose favour certificate of disability is issued.         |                                      |  |
|   | Form – VII                           |  |

# $Form-VII \\ Certificate of Disability \\ (In cases other than those mentioned in Forms V and VI) \\ (Name and Address of the Medical Authority issuing the Certificate) \\ (See rule 18(1))$

|  |                |                       | Recent             | passpor     | t     |
|--|----------------|-----------------------|--------------------|-------------|-------|
|  |                |                       | size               | atteste     | d     |
|  |                |                       | photogra           | aph         |       |
| Certificate No.                        | Date:          |                       | (Showin            | g fac       | e     |
| This is to certify that I have careful | lly examined   |                       | only)              | of th       | e     |
| Shri/Smt/Kum                           |                |                       | son person         | wit         | h ri  |
|  |                | Date of Birtl         | h (D disabilit     | .y          |       |
| Age years, mal                         | e/female       | Registratio           | on N <del>o.</del> |             |       |
| permanent resident of House No         | )              | Ward/Village/St       | reet               |             |       |
| Post Office                            | _ District     | S                     | State              |             | ,     |
| whose photograph is affixed            | above, and     | am satisfied t        | that he/she is     | a case      | of    |
|  | disability     | y. His/her exter      | nt of percent      | tage phys   | sical |
| impairment/disability has been eva-    | aluated as per | guidelines (n         | umber and date     | of issue of | the:  |
| guidelines to be specified) and is si  | hown against t | he relevant disabilit | y in the table be  | low:-       |       |
| S. No Disability                       | Affected       | Diagnosis I           | Permanent          | physical    |       |

|     |                                 | part<br>body | of | impairment/mental<br>disability (in %) |
|-----|---------------------------------|--------------|----|--|
| 1.  | Locomotor disability            | @            |    |  |
| 2.  | Muscular Dystrophy              |              |    |  |
| 3.  | Leprosy cured                   |              |    |  |
| 4.  | Cerebral Palsy                  |              |    |  |
| 5.  | Acid attack Victim              |              |    |  |
| 6.  | Low vision                      | #            |    |  |
| 7.  | Deaf                            | €            |    |  |
| 8.  | Hard of Hearing                 | €            |    |  |
| 9.  | Speech and Language disability  |              |    |  |
| 10. | Intellectual Disability         |              |    |  |
| 11. | Specific Learning Disability    |              |    |  |
| 12. | Autism Spectrum<br>Disorder     |              |    |  |
| 13. | Mental illness                  |              |    |  |
| 14. | Chronic Neurological Conditions |              |    |  |
| 15. | Multiple sclerosis              |              |    |  |
| 16. | Parkinson's disease             |              |    |  |
| 17. | Haemophilia                     |              |    |  |
| 18. | Thalassemia                     |              |    |  |
| 19. | Sickle Cell disease             |              |    |  |

| (Please strike out the disabilities which are not applicab |
|--|
|--|

- 2. The above condition is progressive/non-progressive/likely to improve/not likely to improve.
- 3. Reassessment of disability is:
- (i) not necessary, or

| (ii) is recommended/after      | years | months, | and | therefore | this | certificate |
|--------------------------------|-------|---------|-----|-----------|------|-------------|
| shall be valid till (DD/MM/YY) |       |         |     |           |      |             |

@ - eg. Left/Right/both arms/legs

# - eg. Single eye/both eyes

€ - eg. Left/Right/both ears

4. The applicant has submitted the following document as proof of residence:-

| Nature of document | Date of issue | Details of authority issuing certificate |
|--------------------|---------------|--|
|                    |               |  |

(Authorised Signatory of notified Medical Authority)
(Name and Seal)

Countersigned
{Countersignature and seal of the
Chief Medical Officer/Medical Superintendent/
Head of Government Hospital, in case the
Certificate is issued by a medical authority who is
not a Government servant (with seal)}

Signature/thumb impression of the person in whose favour certificate of disability is

Note.- In case this certificate is issued by a medical authority who is not a Government servant, it shall be valid only if countersigned by the Chief Medical Officer of the District

## FORM - VIII [Intimation of rejection of Application for Certificate of Disability] [See rule 18 (4)] Dated: To, (Name and address of applicant for Certificate of Disability) Sub: Rejection of Application for Certificate of Disability Sir/ Madam, Please refer to your application dated for issue of a Certificate of Disability for the following disability: Pursuant to the above application, you have been examined by the undersigned/ Medical Authority on , and I regret to inform that, for the reasons mentioned below, it is not possible to issue a Certificate of Disability in your favour: (i) (ii) (iii) In case you are aggrieved by the rejection of your application, you may represent 3. to\_\_\_\_\_, requesting for review of this decision. Yours faithfully, (Authorised Signatory of the notified Medical Authority) (Name and Seal)

## **HAILINGFROMCERTIFICATE**

| "Thisistocertify   | rthatShri/Shrimati/Kuma                            | ri* son/daughter* of Shri                |                |
|--------------------|--|--|----------------|
| Village/Town*      | in   | District/Division*                       | hailsfrom*     |
| ArunachalPradesh/I | Manipur/Meghalaya/Mizo                             | oram/Nagaland/ Sikkim.                   |                |
| Date               |  | Signature                                |                |
| Place              | Designation  |  |                |
|                    |  |  | (SealofOffice) |
|                    | rdswhicharenotapplicabl<br>sofStatesnotapplicable. | e.                                       |                |
|                    | UNDERTAKING "A"                                    | (for Government Employees)               |                |
|                    | nated my Head of Office<br>il Services Examination | e / Department in writing on<br>n, 2018. | that I have    |
|                    |  |  | (Signature)    |
|                    |  | Roll                                     | NO             |

NOTE: All candidates in Government service, whether in a permanent or in temporary capacity or as work charged employee, other than casual or daily rated employees or those serving under Public Enterprises will be required to submit an undertaking that they have informed in writing their Head of Office/Department that they have applied for the Examination. Candidates should note that in case a communication is received from their employer by the Commission withholding permission to the candidates applying for appearing at the examination, their applications will be liable to be rejected/candidature will be liable to be cancelled.