															Ann	exui
				Rol	l No. (F	or offi	cial us	se only	')							
												Control	l No: (Fo	r officia	al use)	
RAILWAY RECRUITM	ENT BOARD															
RAILWAT RECRUITM	ENI BOARD															
APPLICATION F Please fill up the Ap except signatures (All applications must	plication in Ca and at places	APITAL LET s indicated \$ (v	TERS ir where Cap	own h	andwrit ters sh	ing,			sed)		h pa o ('	ere y asspo of size The c	lo NO rour re ort size 3.5 co colour p	cent photon X 3 photo	colou togra _l 3.5 cr ograp	ir ph n h
(7 th applications must	bo oublineou iii	1711 OIZO 0000IVI	paper) (ber	ia papor	,							3	month	ns old	d)	
1. CATEGORY N	o.& POST Ca	nt No. Nar	ne of Post:									NO	to be	alles	steu	
2. CHOICE OF RA	ISI	2nd		3rd							\$					
(Whereever ap	pilcable) L	1									Signatu	belo	e candida ow the ph NOT in ca	otogra	ph	e box
3. NAME OF CAN	DIDATE Shri/Sr	mt./Kum.														
4. a) FATHER'S NA	AME Shri															
b) MOTHER'S N	AME Smt.					T				Ī		Ť	T	Т		
*	TY (Tick √) UI be submitted i	R *SC in the format as pr	*ST	*OBC [re-3 for	SC/S	T & An	nexure	e-4 for	OBC.		•				
b). If OBC plea	se state whether	er belonging to Mi	nority Comr	munity	Yes	No	c). If r	minorit	y, indic	ate c	ommur	nity:				
6. Tick (√) Gend	er : Female	Male		- [_				
7. RELIGION: H	indu M	luslim Chris	stian	Sikh	E	Buddh	ist] Ja	in] F	Parsi 🗌		Othe	rs		
8. DATE OF BIRT	H (DD/MM/YYY	Υ)														
9. AGE (as on 0 (Refer para 2 o	1-01-2013) of Employment	Notice)	Years		Months	; [Days	s							
, , ,	ovt Employee	Yes No	(ii) Ex-S			es	No	(iii) PW	/D Ye	es l	No if	YES	, VH	0	Н	НН
		ed (refer para 10.0	06 of CEN.)	Yes	No											
(To be filled comp	ulsorily. If no such	ATION ON BODY n marks, write 'NIL')														
,		e qualifications pre														
(A) Academic		Qualification	Unive	ersity/Bo	ard		Year o	f Passi	ing		Subjec	ts		Ма	ırks%	
SSC/ X/ Matric													-			
Higher Seconda	ry/XII/Inter							· D ·			D I.					
(B) Technical		Qualification	Unive	ersity/Bo	ard		Year o	f Passi	ing	١	Disciplir	ne		Ма	ırks%	
Diploma																
Degree																
Others																
13. ADDRESS (FOR CORRE	SPONDENCE)	Name:														
		P.O:		City	:				Di	st:						
		State:							P	IN Co	de:					
	LWAY STATION ree Railway Pa															
to SC/ST Car	•	-														7
Left Hand Thu of the Candida	mb Impression ate in this box								\$	Sign	nature (of the	Cand	idate	<u> </u>	
		¬ ′									OT in C					

Note: 1) Candidates must fill up their name, father's name, mother's name and date of birth as indicated in their Matriculation Certificate 2) Candidates should put their full signature at all the places in the same language (English or Hindi)

•	nne	VIII	\sim
-	- 1	жч	

INFORMATION SHEET

NAME OF THE	CANDIDATE	<u> </u>										_		
Marital Status :	Married] [Un-M	arried			3.	Nationa	lity					
MEDIUM OF EXAL (Choose any one of		Llangu	12000 (of DDR o	concorned as	givon in n	ara 15	of CENL if o	thor than	English/Hin	di & Hrdu	ı)		
Permanent Addre	-	i iaiigu	iayes (DI KKI C	oncerned as	giveninp	ala IJ	oi CLIV, ii C	ulei ulali	Liigiisii/i iiii	ar & Oruc	')		
		P.O:				City:			Dist:					
D		Stat		D 6 15				PIN Code	e:			_		
Details of Postal	ame of Post	•			enciose) enciose	ea T	Seri	al No. and	Date			Amı	ount	
140	31110 01 1 000	011100	, Dai	iik .			0011	ur 140. unu	Date			7 411	ount	
Are you seeking	fees exemp	otion (Yes /	No)	if	yes, (√)	tick a	ppropriate	box froi	m the follo	wing			
(i) As an Econo						_,		(i	ii) As a F	emale Car	didate			
(Income cert	tificate to be	enclo	osed a	as per A	Annexure -	/)		(i	v) As a S	SC/ST Car	ndidate			
(ii) As a Minorit	ty Candidate ation to be e		ed as	ner An	inexure - 8			,	•	Ex-service	eman			
(00.11 000.01.1		1	l l) poi / ii	,		4	`	/i) As a F T	Railway	, I Cour	rse Comp	lotod	
Do you seek ag	ge relaxation	SC	ST	ОВС	divorced w	y separa voman / V		J & K Resident	Ex-SM	Employe		t Apprent		PWE
(√) TICK appr	ropriate box													
Present employn	ment (To be f	illed b	y all F	Railway	/ Central /S	State / PS	U emp	loyees)						
Design	nation & Gra	de			Date fro	om	m Date to Name			e & address of Employer				
I														
Ex-Serviceman	(Ex-SM)													
Ex-Serviceman Date of Enrol	<u> </u>	Date	e of a	ıttestati	ion	Date o	f Disc	harge		Len	gth of S	Service		
	<u> </u>	Date	e of a	ittestati	ion	Date o	f Disc	harge		Len	gth of S	Service		
Date of Enrol	lment) For Tw		gth of S		Llfe √	
	Iment ere debarred	d by a	ıny RI	RB in th	ne past	a) NO) [] b) For Tw	o years [gth of S	Service c) For	Llfe [
Date of Enrol	lment ere debarred ched in proof	d by a	iny RI ndicat	RB in th	ne past	a) N0 the releva	O	b ses indicat	ed below alification (o years [c) For	charge (Certificate
Whether you we Documents attac	ere debarred ched in proof Mat (for	d by a f of : I	nny RI ndicat LC Cer proof)	RB in the te (√) tientificate	ne past ck mark in t	a) NO the releva cational lification p	oant box	bines indicate Quare (For	ed below	o years [/ Certificate if seman)	any [c) For	charge (Ex-Sei	rviceman (for SRE/
Date of Enrol Whether you we Documents attac IPO/DD Community (For SC/STaAnnexure - Annexure - A	ere debarred ched in proof Mat (for Certificate as per	d by a	nny RI ndicat LC Cer proof)	RB in the te (ne past ck mark in t	a) NO the releva cational lilification p for ca	ant box	b Qua (For ration rity s as per	ed below alification (o years [/ Certificate if /	any [Certification as per	c) For	charge (Ex-Sei	rviceman (for SRE/
Date of Enrol Whether you we Documents attace IPO/DD Community (For SC/STa Annexure - per Annexure Economical	ere debarred ched in prooi Mat (for Certificate as per 3, OBC-as re - 4)	d by a f of : In price of the p	ndicat ndicat LC Cer proof) Self De candida Annexu	RB in the () tide (\sqrt{) t	ne past ck mark in t Edu Qua form OBC	a) NO the releva cational lification p Se for ca An	ant box roof elf Declarm Mino ndidate: inexure	des indicat Qua (Foi ration rity s as per - 8 Decla	red below	o years [/ Certificate if income in the common in the com	any [Certifical as per 1-9 ttes/cand	c) For Disc (For	charge (Ex-Sei NOC (Govt.	rviceman (for SRE/ /PSU em
Date of Enrol Whether you we Documents attac IPO/DD Community (For SC/STa Annexure - per Annexus Economical (Should be in the control of	ere debarred ched in proof Mat (for Certificate as per 3,0BC-as re - 4)	d by a f of : Ii ric/SSI DOB p	nny RI ndicat LC Cer proof) Self De candida Annexu	RB in the () tie tie (\sqrt{) tie tificate eclaration ates as pure - 5	ne past ck mark in the Charles of	a) NO the releva cational ulification p Se Annexure -	ont box roof elf Decla m Mino ndidate: nnexure	Declaration affect.	ration forned by cere	O years [// Certificate if : :eman) Disability (for PWD Annexure aVH candida bral palsy as	Certificar as per -9 ttes/cand s per Ann	c) For Disc (For the didates who exure-10	charge (Ex-Sei NOC (Govt.	rviceman (for SRE/ /PSU em
Date of Enrol Whether you we Documents attact IPO/DD Community (For SC/STa Annexure - per Annexure Economical (Should be Please copy the f (Not filling up the)	ere debarred ched in prooi Mat (for Certificate as per 3,0BC-as re - 4) Illy backward C in the Letter H following dec passage belo	d by a f of : Ii ric/SSI DOB r DOB r ertifica ead of laratic w/ fillin	ndicate LC Cerbroof) Self Decandidate Annexute the issuing in control of the cont	RB in the () tide tide (in the content of t	ne past ck mark in the Color of Color o	a) NO the releva cational lification p Se for ca An Annexure -	ant box roof elf Declarm Mino ndidate: nnexure 7)	b b Quates indicat Quater (For running ant)	ration forned by cere handwrit	o years [/ Certificate if .ceman) Jisability (for PWD Annexure nVH candida bral palsy a:	any [Certifical as per 3-9 ttes/cand s per Ann capital	c) For Disconference (For ideal contents) Disconfer	charge (Ex-Ser NOC (Govt.	rviceman (for SRE/ /PSU em
Date of Enrol Whether you we Documents attac IPO/DD Community (For SC/STa Annexure - per Annexure (Should be in Please copy the following	ere debarred ched in proof Mat (for Certificate as per ser e - 4) lly backward C in the Letter H collowing decoration all the same. I fit	ertificaead of	any RI ndicat LC Cer proof) Self De candida Annexu te the iss on in the povision decla	RB in the te (\checkmark) tide test as pour e - 5 suing auther the space apital test as of this rethat a	ne past ck mark in the grade of the past o	a) NC the releva cational lification p Se for ca An Annexure - pelow in y qualify the nere by c ments ma	ant box roof elf Declarent Mino ndidate: nexure 7) rour owe applic	b b des indicat Que (For ration rity) s as per - 8 Decla affect rm running ant) that I full me in this a	red below alification (r Ex-Service ration formed by cere handwrit	o years [// Certificate if // Destificate if // ceman) Disability (for PWD Annexure NVH candida bral palsy as ing (NOT in e condition n are true,	any [Certificat as per -9 ttes/cand s per Ann capital ns of eli comple	c) For Disc (For te idates who exure-10 s): igibility a ite and co	charge (FEX-Sei NOC (Govt.) ose writing	rviceman (for SRE/ /PSU em ing speed dertake o the bes
Date of Enrol Whether you we Documents attac IPO/DD Community (For SC/STa Annexure - per Annexur Economical (Should be Please copy the fr (Not filling up the p "After carefully re	ere debarred ched in proof (for Certificate as per 3,0BC-as re - 4) Illy backward C in the Letter H following decorated and all the the same. I find belief. In care	ertifica ead of laratic w/ filling prourther ase of	nny RI ndicat LC Cer proof) Self De candida Annexu te the iss on in the gin co vision decla any o	RB in the te (\checkmark) tid tifficate ecclaration as pure - 5 suing authors of this ire that a fmy stall	ne past ck mark in f Que form OBC er pority as per / e provided k ters will dis is CEN, I h all the stater tements are	a) NC the releva cational lification p Se for ca Annexure - pelow in y qualify the ments ma e found to	ant box roof elf Declarm Mino ndidate: nnexure 7) rour ow e applic declare de by I be fals	b b ces indicat Que (Foi ration ration ration ration affect ration affect ration running ant) that I full me in this a e or incorn	ration formed by cere handwrit Ifill all th application consults and consults are	o years [// Certificate if // Certificate if // Cerman) Disability (for PWD Annexure NVH candida bral palsy aving (NOT in e condition n are true, pressing a	any [Certificat as per -9 ttes/cand s per Ann capital ns of eli comple	c) For Disc (For te idates who exure-10 s): igibility a ite and co	charge (FEX-Sei NOC (Govt.) ose writing	rviceman (for SRE/ /PSU em ing speed dertake o the bes
Date of Enrol Whether you we Documents attact IPO/DD Community (For SC/STa Annexure - per Annexure Conomical (Should be in the per Annexure Conomic	ere debarred ched in proof (for Certificate as per 3,0BC-as re - 4) Illy backward C in the Letter H following decorated and all the the same. I find belief. In care	ertificaead of	nny RI ndicat LC Cer proof) Self De candida Annexu te the iss on in the gin co vision decla any o	RB in the te (\checkmark) tid tifficate ecclaration as pure - 5 suing authors of this ire that a fmy stall	ne past ck mark in f Que form OBC er pority as per / e provided k ters will dis is CEN, I h all the stater tements are	a) NC the releva cational lification p Se for ca Annexure - pelow in y qualify the ments ma e found to	ant box roof elf Declarm Mino ndidate: nnexure 7) rour ow e applic declare de by I be fals	b b ces indicat Que (Foi ration ration ration ration affect ration affect ration running ant) that I full me in this a e or incorn	ration formed by cere handwrit Ifill all th application consults and consults are	o years [// Certificate if // Certificate if // Cerman) Disability (for PWD Annexure NVH candida bral palsy aving (NOT in e condition n are true, pressing a	any [Certificat as per -9 ttes/cand s per Ann capital ns of eli comple	c) For Disc (For te idates who exure-10 s): igibility a ite and co	charge (FEX-Sei NOC (Govt.) ose writing	rviceman (for SRE/ /PSU em ing speed dertake o the bes
Date of Enrol Whether you we Documents attact IPO/DD Community (For SC/STa Annexure - per Annexure Conomical (Should be in the per Annexure Conomic	ere debarred ched in proof (for Certificate as per 3,0BC-as re - 4) Illy backward C in the Letter H following decorated and all the the same. I find belief. In care	ertificaead of	nny RI ndicat LC Cer proof) Self De candida Annexu te the iss on in the gin co vision decla any o	RB in the te (\checkmark) tid tifficate ecclaration as pure - 5 suing authors of this ire that a fmy stall	ne past ck mark in f Que form OBC er pority as per / e provided k ters will dis is CEN, I h all the stater tements are	a) NC the releva cational lification p Se for ca Annexure - pelow in y qualify the ments ma e found to	ant box roof elf Declarm Mino ndidate: nnexure 7) rour ow e applic declare de by I be fals	b b ces indicat Que (Foi ration ration ration ration affect ration affect ration running ant) that I full me in this a e or incorn	ration formed by cere handwrit Ifill all th application consults and consults are	o years [// Certificate if // Certificate if // Cerman) Disability (for PWD Annexure NVH candida bral palsy aving (NOT in e condition n are true, pressing a	any [Certificat as per -9 ttes/cand s per Ann capital ns of eli comple	c) For Disc (For te idates who exure-10 s): igibility a ite and co	charge (FEX-Sei NOC (Govt.) ose writing	rviceman (for SRE/ /PSU em ing speed dertake o the bes
Date of Enrol Whether you we Documents attact IPO/DD Community (For SC/STa Annexure - per Annexure Conomical (Should be in the per Annexure Conomic	ere debarred ched in proof (for Certificate as per 3,0BC-as re - 4) Illy backward C in the Letter H following decorated and all the the same. I find belief. In care	ertificaead of	nny RI ndicat LC Cer proof) Self De candida Annexu te the iss on in the gin co vision decla any o	RB in the te (\checkmark) tid tifficate ecclaration as pure - 5 suing authors of this ire that a fmy stall	ne past ck mark in f Que form OBC er pority as per / e provided k ters will dis is CEN, I h all the stater tements are	a) NC the releva cational lification p Se for ca Annexure - pelow in y qualify the ments ma e found to	ant box roof elf Declarm Mino ndidate: nnexure 7) rour ow e applic declare de by I be fals	b b ces indicat Que (Foi ration ration ration ration affect ration affect ration running ant) that I full me in this a e or incorn	ration formed by cere handwrit Ifill all th application consults and consults are	o years [// Certificate if // Certificate if // Cerman) Disability (for PWD Annexure NVH candida bral palsy aving (NOT in e condition n are true, pressing a	any [Certificat as per -9 ttes/cand s per Ann capital ns of eli comple	c) For Disc (For te idates who exure-10 s): igibility a ite and co	charge (FEX-Sei NOC (Govt.) ose writing	rviceman (for SRE/ /PSU em ing speed dertake o the bes
Date of Enrol Whether you we Documents attact IPO/DD Community (For SC/STa Annexure - per Annexure Conomical (Should be in the per Annexure Conomic	ere debarred ched in proof (for Certificate as per 3,0BC-as re - 4) Illy backward C in the Letter H following decorated and all the the same. I find belief. In care	ertificaead of	nny RI ndicat LC Cer proof) Self De candida Annexu te the iss on in the gin co vision decla any o	RB in the te (\checkmark) tid tifficate ecclaration as pure - 5 suing authors of this ire that a fmy stall	ne past ck mark in f Que form OBC er pority as per / e provided k ters will dis is CEN, I h all the stater tements are	a) NC the releva cational lification p Se for ca Annexure - pelow in y qualify the ments ma e found to	ant box roof elf Declarm Mino ndidate: nnexure 7) rour ow e applic declare de by I be fals	b b ces indicat Que (Foi ration ration ration ration affect ration affect ration running ant) that I full me in this a e or incorn	ration formed by cere handwrit Ifill all th application consults and consults are	o years [// Certificate if // Certificate if // Cerman) Disability (for PWD Annexure NVH candida bral palsy aving (NOT in e condition n are true, pressing a	any [Certificat as per -9 ttes/cand s per Ann capital ns of eli comple	c) For Disc (For te idates who exure-10 s): igibility a ite and co	charge (FEX-Sei NOC (Govt.) ose writing	rviceman (for SRE/ /PSU em ing speed dertake o the bes
Date of Enrol Whether you we Documents attact IPO/DD Community (For SC/STa Annexure - per Annexure Conomical (Should be in the per Annexure Conomic	ere debarred ched in proof (for Certificate as per 3,0BC-as re - 4) Illy backward C in the Letter H following decorated and all the the same. I find belief. In care	ertificaead of	nny RI ndicat LC Cer proof) Self De candida Annexu te the iss on in the gin co vision decla any o	RB in the te (\checkmark) tid tifficate ecclaration as pure - 5 suing authors of this ire that a fmy stall	ne past ck mark in f Que form OBC er pority as per / e provided k ters will dis is CEN, I h all the stater tements are	a) NC the releva cational lification p Se for ca Annexure - pelow in y qualify the ments ma e found to	ant box roof elf Declarm Mino ndidate: nnexure 7) rour ow e applic declare de by I be fals	b b ces indicat Que (Foi ration ration ration ration affect ration affect ration running ant) that I full me in this a e or incorn	ration formed by cere handwrit Ifill all th application consults and consults are	o years [// Certificate if // Certificate if // Cerman) Disability (for PWD Annexure NVH candida bral palsy aving (NOT in e condition n are true, pressing a	any [Certificat as per -9 ttes/cand s per Ann capital ns of eli comple	c) For Disc (For te idates who exure-10 s): igibility a ite and co	charge (FEX-Sei NOC (Govt.) ose writing	rviceman (for SRE/ /PSU em ing speed dertake o the bes
Date of Enrol Whether you we Documents attact IPO/DD Community (For SC/STa Annexure - per Annexure Conomical (Should be in the per Annexure Conomic	ere debarred ched in proof (for Certificate as per 3,0BC-as re - 4) Illy backward C in the Letter H following decorated and all the the same. I find belief. In care	ertificaead of	nny RI ndicat LC Cer proof) Self De candida Annexu te the iss on in the gin co vision decla any o	RB in the te (\checkmark) tid tifficate ecclaration as pure - 5 suing authors of this ire that a fmy stall	ne past ck mark in f Que form OBC er pority as per / e provided k ters will dis is CEN, I h all the stater tements are	a) NC the releva cational lification p Se for ca Annexure - pelow in y qualify the ments ma e found to	ant box roof elf Declarm Mino ndidate: nnexure 7) rour ow e applic declare de by I be fals	b b ces indicat Que (Foi ration ration ration ration affect ration affect ration running ant) that I full me in this a e or incorn	ration formed by cere handwrit Ifill all th application consults and consults are	o years [// Certificate if // Certificate if // Cerman) Disability (for PWD Annexure NVH candida bral palsy aving (NOT in e condition n are true, pressing a	any [Certificat as per -9 ttes/cand s per Ann capital ns of eli comple	c) For Disc (For te idates who exure-10 s): igibility a ite and co	charge (FEX-Sei NOC (Govt.) ose writing	rviceman (for SRE/ /PSU em ing speed dertake o the bes
Date of Enrol Whether you we Documents attact IPO/DD Community (For SC/STa Annexure - per Annexure Conomical (Should be in the per Annexure Conomic	ere debarred ched in proof (for Certificate as per 3,0BC-as re - 4) Illy backward C in the Letter H following decorated and all the the same. I find belief. In care	ertificaead of	nny RI ndicat LC Cer proof) Self De candida Annexu te the iss on in the gin co vision decla any o	RB in the te (\checkmark) tid tifficate ecclaration as pure - 5 suing authors of this ire that a fmy stall	ne past ck mark in f Que form OBC er pority as per / e provided k ters will dis is CEN, I h all the stater tements are	a) NC the releva cational lification p Se for ca Annexure - pelow in y qualify the ments ma e found to	ant box roof elf Declarm Mino ndidate: nnexure 7) rour ow e applic declare de by I be fals	b b ces indicat Que (Foi ration ration ration ration affect ration affect ration running ant) that I full me in this a e or incorn	ration formed by cere handwrit Ifill all th application consults and consults are	o years [// Certificate if // Certificate if // Cerman) Disability (for PWD Annexure NVH candida bral palsy aving (NOT in e condition n are true, pressing a	any [Certificat as per -9 ttes/cand s per Ann capital ns of eli comple	c) For Disc (For te idates who exure-10 s): igibility a ite and co	charge (FEX-Sei NOC (Govt.) ose writing	dertake o the bes
Date of Enrol Whether you we Documents attact IPO/DD Community (For SC/STa Annexure - per Annexure Conomical (Should be in the per Annexure Conomic	Iment are debarred ched in proof Mat (for Certificate as per 3,0BC-as re - 4) Illy backward C in the Letter H following dec passage belo reading all the same. If find belief. In casame would be belowed to be a same would be belowed to be belowed to be a same would be belowed to	ertificaead of	nny RI ndicat LC Cer proof) Self De candida Annexu te the iss on in the gin co vision decla any o	RB in the te (\checkmark) tid tifficate ecclaration as pure - 5 suing authors of this ire that a fmy stall	ne past ck mark in f Que form OBC er pority as per / e provided k ters will dis is CEN, I h all the stater tements are	a) NC the releva cational lification p Se for ca Annexure - pelow in y qualify the ments ma e found to	ant box roof elf Declarm Mino ndidate: nnexure 7) rour ow e applic declare de by I be fals	b b ces indicat Que (Foi ration ration ration ration affect ration affect ration running ant) that I full me in this a e or incorn	ration formed by cere handwrit Ifill all th application consults and consults are	o years [// Certificate if // Certificate if // Cerman) Disability (for PWD Annexure NVH candida bral palsy aving (NOT in e condition n are true, pressing a	any [Certificat as per -9 ttes/cand s per Ann capital ns of eli comple	c) For Disc (For te idates who exure-10 s): igibility a ite and co	charge (FEX-Sei NOC (Govt.) ose writing	rviceman (for SRE/ /PSU em ing speed dertake o the bes

Annexure-3

RAILWAY RECRUITMENT BOARD FORM OF CASTE CERTIFICATE FOR SC/ST

A Candidate who claims to belong to one of the scheduled caste or scheduled tribe should submit in support of his/her claim a self attested copy of a certificate in the form given below from the district magistrate or the sub-divisional officer or any other officer as indicated below of the district in which his/her parents (or surviving parents) ordinarily reside and who has been designed by the State Government concerned as competent to issue such a certificate. If both the parents are dead, the officer signing the certificate should be of the district in which the candidate himself/herself reside otherwise than for the purpose of his/her own education. Wherever, photograph is an integral part of the certificate, the RRB would accept only self attested photocopies of such certificates and not any other attested or true copy.

(The Form of the certificate to be produced by Scheduled Castes and Scheduled Tribes candidates applying for appointment to posts under the Government of India)

	This is to certify that Shri / Shrimathi	/ Kumari	
		of Village / Town*	
	District / Division*	of State / Union Territory*	
		Caste / Tribe* which is recognised as a Scheduled Caste / Scheduled Tribe*	
uno	der:-	outle, into interesting a contract of contract into	
	The Constitution (Scheduled Castes) The Constitution (Scheduled Castes) The Constitution (Scheduled Tribes) (
		s and Scheduled Tribes Lists (Modification) Order, 1956, the Bombay Re-	
nro		e Punjab Re-organisation Act. 1966, the State of Himachal Pradesh Act, 1970 and	d
		organisation) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders.	
	nendment) Act, 1976)	signification, rioq 1011 and also constanted custos and constanted indeed crassis.	
(, ,,	The Constitution (Jammu & Kashmir)	Scheduled Castes order 1956@	
		par Islands) Scheduled Tribes Order, 1959 @ as amended by the Scheduled Cast	es
	and Scheduled Tribes Order (Amendm		00
		aveli) Scheduled Castes Order, 1962. The Constitution (Dadra and Nagar Haveli)	
	Scheduled Tribes Order, 1962.	iron, contouring ductor order, rose. The contouring padra and ragar haron,	
	The Constitution (Pondicherry) Sched	uled Castes Orders 1964 @	
	The Constitution (Scheduled Tribes) (
	The Constitution (Goa, Daman and Di		
	The Constitution (Nagaland) Schedule		
	The Constitution (Sikkim) Scheduled		
	The Constitution (Sikkim) Scheduled		
		and / or his / her* family, reside(s	s) in
		of* District/Division	
		Signature	
		**Designation	
		(with seal of office) State/Union Territory**	
	Place		
	Date	•••	
	*Please delete the words which are n		
	@Please quote the specific president		
		* used here will have the same meaning as in Section 20 of the Representation o	ıf.
the			
LIIG	** Officers competent to issue Caste		
	** District Magistrate / Additional Dist Deputy Collector / 1st Class Stipend	Tribe en ultrates. irct Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissior diary Magistrate / City Magistrate / Sub-Divisional Magistrate / Taluk Magistrate / Sub-Divisional Magistrate / Taluk Magistrate / Commissioner (not below the rank of 1st class Stipendiary Magistrate) Chief Preside	ite /
	Magistrate / Additional Chief Presidenc Sub-Divisional Officer of the area when	by Magistrate / Presidency Magistrate / Revenue Officers not below the rank of Tahsi the candidate and / or his / her family normally reside(s). milnadu State should submit caste certificate ONLY from the REVENUE DIVISION	ilar/

Annexure-4

RAILWAY RECRUITMENT BOARD

OBC CERTIFICATE FORMAT

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR APPOINTMENT TO POST UNDER THE GOVERNMENT OF INDIA

This is to certify that Shri / Smt. / Kum.*

	son/daughter* of Shri of
	community which is recognised as Backward Class under: (indicate the Sub Caste above)
1)	Resolution No.12011/68/93-BCC@dated 10th September 1993, published in the Gazette of India - Extraordinary-part 1. Section 1.No.186, dated 13th September 1993.
2)	Resolution No.12011/9/94-BCC, dated 19th October 1994, published in the Gazette of India - Extraordinary-part 1. Section 1.No.163, dated 20th October 1994.
3)	Resolution No.12011/7/95-BCC, dated 24th May 1995, published in the Gazette of India - Extraordinary-part 1. Section 1.No.88, dated 25th May 1995.
4)	Resolution No.12011/44/96-BCC, dated 6th December 1996, published in the Gazette of India - Extraordinary-part 1. Section 1.No.210, dated 11th December 1996.
5)	Resolution No.12011/68/93-BCC, published in the Gazette of India -Extraordinary- No.129, dated the 8th July 1997.
6)	Resolution No.12011/12/96-BCC, published in the Gazette of India -Extraordinary- No.164, dated the 1st September 1997.
7)	Resolution No.12011/99/94-BCC, published in the Gazette of India -Extraordinary- No.236, dated the 11th December 1997.
8)	Resolution No.12011/13/97-BCC, published in the Gazette of India -Extraordinary- No.239, dated the 3rd December 1997
9)	Resolution No.12011/12/96-BCC, published in the Gazette of India -Extraordinary- No.166, dated the 3rd August 1998.
10)	Resolution No.12011/68/93-BCC, published in the Gazette of India -Extraordinary- No.171, dated the 6th August 1998.
11)	Resolution No.12011/68/98-BCC, published in the Gazette of India -Extraordinary- No.241, dated the $27th$ October 1999.
12)	Resolution No.12011/88/98-BCC, published in the Gazette of India -Extraordinary- No.270, dated the 6th December 1999.
13)	Resolution No.12011/36/99-BCC, published in the Gazette of India -Extraordinary- No.71, dated the 4th April 2000.
Shri/	Smt./Kum.* and/or his/her family ordinary reside(s) in
Gove	s not belong to the persons/sections (Creamy layer) mentioned in column 3 (of the Schedule to the ernment of India, Department of Personnel and Training O.M.No.36033/3/2004-Estt. (Res) dated 3.2004.
Plac	e:
Date	
	DISTRICT MAGISTRATE / DY. COMMISSIONER ETC. *Strike out whichever is not applicable (With Seal of Office)
	(a) The term 'ordinarily' used here will have the same meaning as in section 20 of the Representation of

NB: (a) The term 'ordinarily' used here will have the same meaning as in section 20 of the Representation of Peoples Act 1950. (b) The Authorities competent to issue caste certificate are indicated below: (I)District Magistrate / Additional Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / 1st Class Stipendiary Magistrate / Sub-Divisional Magistrate / Taluk Magistrate) (ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate (iii) Revenue Officer not below the rank of Tahsildar, and (iv) Sub-Divisional Officer of the area where the Candidate and or his family resides.

RAILWAY RECRUITMENT BOARD Annexure-5
Proforma for declaration to be submitted by Other Backward Class Candidates along with the application while applying for the posts against Employment Notice No CEN 05/2012 of RRB
DECLARATION
"I, son/daughter of Shri resident of
Village/Town/City district
recognised as a backward class by the Government of India for the purpose of reservation in services as per
$orders\ contained\ in\ Department\ of\ Personnel\ and\ Training\ Office\ Memorandum\ No.36012/22/93-Estt.\ (SCT)$
dated 08.09.1993. It is also declared that I do not belong to persons/sections (Creamy Layer) mentioned in
column 3 of the Schedule to the above referred Office Memorandum dated 08.03.1993 and its subsequent
through O.M. No. 36033/3/2004-Estt. (Res/) dated 09.03.2004"
Place: Signature of the Candidate Date: Name of the candidate

11	11	м	\mathbf{O}	41	100 /
	ш	ш	ч.	יי	

FORMAT OF INCOME CERTIFICATE TO BE ISSUED ON LETTER HEAD OF ISSUING AUTHORITY For Waiver of Examination Fees For RRB Examination

(Economically backward chasses only)

1.	Name of Candidate	:	
2.	Father's Name	:	
3.	Age	:	
4.	Residential Address	:	
5.	Annual Family income	:	
	(in words & Figures)		
6.	Date of Issue	:	
7.	Signature	:	Name
8.	Stamp of Issuing authority	:	

Note: Economically Backward classes will mean the candidates whose family income less than Rs. 50,000 per annum. The following authorities are authorised to issue income certificate for the purpose of identifying economically backward classes

- ${\bf 1.} \ \ {\bf District\ Magistrate\ of\ any\ other\ Revenue\ Officer\ up to\ the\ level\ of\ Tehsildar.}$
- 2. Sitting member of Parliament of Lok Sabhas for persons of their own constituency
- 3. BPL Card or any other certificate issued by Central Government under a recognized poverty alleviation programme or Izzat MST issued by Railways
- 4. Union Minister may also recommend to Chairman / RRBs for any person from anywhere in the country
- 5. Sitting Member of Parliament of Rajya Sabha for person of the district in which these Mps normally reside

Annexure-8

RAILWAY RECRUITMENT BOARD

 $Proforma \, for \, declaration \, to \, be \, submitted \, by \, Minority \, candidates \, along \, with \, the \, application \, for \, the \, declaration \, to \, be \, submitted \, by \, Minority \, candidates \, along \, with \, the \, application \, for \, the \, declaration \, to \, be \, submitted \, by \, Minority \, candidates \, along \, with \, the \, application \, for \, the \, declaration \, to \, be \, submitted \, by \, Minority \, candidates \, along \, with \, the \, application \, for \, the \, declaration \, the \,$ post against Centalised Employment Notice No. 05/2012

	DECLARATION
I	son/daughter of
Shri	
Village/Town/City	district
State	hereby declare that I belong
to	(indicate your religion), which is notified as minority
community by the Central Govt.	
Place:	Signature of the Candidate
Date:	Name of the Candidate

RAILWAY RECRUITMENT BOARD

Annexure-9

FORM OF MEDICAL CERTIFICATE FOR PERSONS WITH DISABILITIES (PWD)

	NAME & ADDRE	SS OF THE IN	Date:						
Certificate No DISABILITY CERTIFICATE						photograph sh (The photograph)	Paste here your recent color photograph showing the disabilit (The photograph should be		
This is to certified that Smt./Shri/ and/daughter* of Shri							the Chairperson edical Board)		
son/daughter* of Shriage									
suffering from permanent disability									
	33.,								
A. Locomotor or cerebral palsy:							ndidate in the abov		
(I) BL-Both legs affected but no (ii) BA-Both arms affected	tarms.					box below	the photograph		
.,		paired reach							
(iii) OL-One leg affected (right o	r left) (D) W6	eakness of grip							
(iii) OE onolog anolog (right o		paired reach							
() O A O (eakness of grip	(c) Ataxi	ic					
(iv) OA-One arm affected (right		paired reach							
		eakness of grip	(c) Ataxi	ic					
(v) BH-Stiff back and hips (can	, ,		(-)						
(vi) MW-Muscular weakness a	nd limited physical endu	rance.							
B. Blindness or Low Vision:			(C) Hearing impa	airment	:				
(I)B-Blind (ii) PB-Partially	Blind		(I)D-Def	(ii) PE)-Partially	Deaf			
(Delete the category which	ever is not applicable)							
2. This condition is progressive/no	on-progressive/likely to	improve/not likely	y to improve. Re-as	ssessm	ent of this	case is not			
ommended/ is recommended after									
3. Percentage of disability in his /									
4. Smt./Shri/Kum*		eets the following			-		s:		
(I) F-can perform work by mai				es 🗆					
(ii) PP-can perform work by pu				es E					
(iii) L-can perform work by liftir(iv) KC-can perform work by kr				es 🗆					
(v) B-can perform work by ber				es d					
(vi) S-can perform work by sitti	•			es E					
(vii) ST-can perform work by sta	•			es E					
(viii) W-can perform work by wa				es D					
(ix) SE-can perform work by se				es [
(x) H-can perform work by hea			Y	es 🗆	_ No				
(xi) RW-can perform work by re	eading and writing		Y	es 🗆	□ No				
(Cimpature of Deater)		(a)			(Cinnatuus	of Doodon)			
(Signature of Doctor)		(Signature of Do	ctor)		(Signature Name:	OI DOCIOF)			
Name:		Name: Registration No:			Registratio	n No:			
Registration No:		Member, Medica			•	m No. Hairperson, Me	dical Roard		
Member, Medical Board		monibol, modice	ii boaiu		monibol, o	man poroon, mo	aloui boulu		
*Please delete the words which ar									
Place:	Counter sig		edical Superintend	dent/CN	/IU/				
Date:		Head of Hospi	itai (with seal)						
Note: (i)According to the Persons	with Disabilities (Equa	al Opportunities. I	Protection of Right	and Fu	II participa	ation) Rules, 1	996 notified o		
12.1996 by the Central Governmen									
ual Opportunities. Protection of Rigi									
r constituted by the Central or the Si of which at least one shall be a spe									
n minori activast vito stian De a spe	oranociii uio pai uoulal II	oia ioi aoooooliiy i	ioooiniotoi / noalilly	unu opt	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	io oui uniouto W	ouiu bo vailu li		

 $a \, period \,\, of \, 5 \, years \, for \, those \,\, whose \,\, disability \, is \, temporary. \,\, for \, those \,\, who \,\, acquired \, permanent \,\, disability, \, the \,\, validity \,\, can \, be \,\, shown \,\, as \,\, permanent.$

Annexure-10 RAILWAY RECRUITMENT BOARD **DECLARATION TO BE SUBMITTED BY VISUALLY HANDICAPPED CANDIDATES/** THOSE CANDIDATES WHOSE WRITING SPEED IS AFFECTED BY CEREBRAL PALSY PARTICULARS OF SCRIBE PROPOSED TO BE ENGAGED BY THE CANDIDATE 1. 2. 3. Control No: (for office use) Paste here recent color passport size photograph of the SCRIBE of size 4cm x 5cm (The color photograph should not be more than 3 months old) Name of the Scribe ... Father's Name of the Scribe Address of the Scribe: (a) Permanent Address (b) Present Address Signature of SCRIBE in the above box below the photograph Educational Qualification of the Scribe Relationship, if any, of the Scribe to the Candidate DECLARATION We hereby declare that the particulars furnished above are true and correct to the best of our knowledge and belief. We have read/ been read out the instructions of the Railway Recruitment Board regarding conduct of the visually challenged candidates/scribes at this examination and hereby undertake to abide by them. We also declare that: (a) The academic qualification of the SCRIBE is below the qualification prescribed for the post applied for *(b) The academic discipline of the SCRIBE is same as of the candidate since the application is for general posts/ academic discipline of the SCRIBE is different from that of the candidate as the application is for a specialist post. (Delete the portion not applicable) (c) The SCRIBE has not secured more than 60% marks in the qualification mentioned *Strike out which is not applicable. (Signature of the Candidate) (Signature of the Scribe) Left Thumb impression of the Scribe in the box given above Left Thumb impression of the Candidate

in the box given above