

## APPLICATION FORM FOR ISSUANCE OF SOCIALLY AND EDUCATIONALLY BACKWARD CASTE CERTIFICATE

(Fields marked \* are mandatory)

### Documents Required

#### Mandatory Documents

1. Proof of Identity of Applicant - Voter ID / Aadhaar Card / PAN Card / Passport.. etc \*
2. Income/Self declaration / Income certificate / Salary Certificate / Income Tax Returns document(Any one document) \*

#### Supporting Documents

1. Copy of ROR / Land Passbook 1
2. Any other document in support/claim

Paste Applicant  
Photo

**Delivery Time Lines:** Estimated Timelines to Process The Application (Expected Date of Delivery) - 15 Working Days

(Expected date is calculated excluding holidays)

### Fill all the details in the block letters

#### Personal Details

Applicant Name\* :- \_\_\_\_\_

Gender\* :- \_\_\_\_\_ Marital Status\*:- \_\_\_\_\_

Date of Birth\* :- \_\_\_\_\_ Age\* :- \_\_\_\_\_

Aadhar Number :- \_\_\_\_\_ Religion :- \_\_\_\_\_

Phone No :- \_\_\_\_\_ Mobile No:- \_\_\_\_\_

Email Id :- \_\_\_\_\_

#### Parent's Details

Father Name\* :- \_\_\_\_\_

Mother Name\* :- \_\_\_\_\_

Permanent Address :-      ☐ Urban      ☐ Rural

**Applicant residing outside Odisha? If Yes -**

State*	:- _____		
District *	:- _____	Sub Division *	:- _____
Tahsil *	:- _____	RI Circle *	:- _____
Village *	:- _____	GP /ULB	:- _____
House no. / Street Name	:- _____	Police Station *	:- _____
Post Office	:- _____	Pin	:- _____

### Location - Permanent Address

Address Type:- ☐ Rural ☐ Urban

### Family Members / Guardian Details (In case of minor or person unable to manage his/her own affairs)

If any other person other than applicant filling the Application? \* ☐ Yes ☐ No

Relation With Applicant\* :- \_\_\_\_\_

Submitter's Name\* :- \_\_\_\_\_

Present Address :- ☐ Urban ☐ Rural

Is Present Address Same as Permanent Address? ☐ Yes ☐ No

(If "No" please fill the Present address given below)

State \* :- \_\_\_\_\_

District \* :- \_\_\_\_\_

Tahsil \* :- \_\_\_\_\_

Village \* :- \_\_\_\_\_

House no. / Street Name :- \_\_\_\_\_

Post Office :- \_\_\_\_\_

Sub Division \* :- \_\_\_\_\_

RI Circle \* :- \_\_\_\_\_

GP /ULB :- \_\_\_\_\_

Police Station \* :- \_\_\_\_\_

Pin :- \_\_\_\_\_

### Location Details - Present Address

Address Type:- ☐ Rural ☐ Urban

### Caste Details :-

Caste \* :- \_\_\_\_\_ Religion\* :- \_\_\_\_\_

Sub Caste/Community :- \_\_\_\_\_ Occupational Background :- \_\_\_\_\_

Serial number of the Caste in the State list of SEBC:- \_\_\_\_\_

### Father Mother& Spouse Other Details

Please select the respective relation(Father/Mother/Spouse) to fillup the details

State of the Parent (s)/Husband :-

☐ **Father**                      ☐ **Mother**                      ☐ **Spouse**

**Constitutional Post**

Designation : \_\_\_\_\_

**Government Servics**

Service(Central/State): \_\_\_\_\_

Designation: \_\_\_\_\_

Scale of Pay, including classification if any : \_\_\_\_\_

Date of appointment to the Post: \_\_\_\_\_

Age at the time of promotion to the class-1post: \_\_\_\_\_

**Employment of International Organization**

Name of Organization: \_\_\_\_\_

Designation: \_\_\_\_\_

Period of Service Form: \_\_\_\_\_

Period of Service To: \_\_\_\_\_

**Death/Permanent In-capacitation (Putting an officer out of Service)**

Date of Death/Permanent In-capacitation: \_\_\_\_\_

Details of permanent In-capacitation; \_\_\_\_\_

**Employment in public Sector Undertaking**

Name of organization: \_\_\_\_\_

Designation: \_\_\_\_\_

Date of appointment to the post: \_\_\_\_\_

**Armed Forces including Para-military forces**

Designation: \_\_\_\_\_

Scale of pay: \_\_\_\_\_

**Professional Class(Please indicate whether engaged in Trade, Business and Industry)**

Applicant's Occupation/Profession: \_\_\_\_\_

**Property Owners**

Agricultural land holding (owned by mother, father and minor children)

Location: \_\_\_\_\_

Size of holding (Area): \_\_\_\_\_

**Irrigated (Type of Irrigated Land)**

I \_\_\_\_\_

II \_\_\_\_\_

III \_\_\_\_\_

**Unirrigated**

**IV. Percentage of irrigated landholding to statutory ceiling limit**

Under state land ceiling law: \_\_\_\_\_

**V. If land holding is both irrigated/un-irrigated total irrigated land**

holding on the basis of conversion formula under state land celing law: \_\_\_\_\_

**VI. Percentage of total irrigated land holding to statutory ceiling limits as per (V):** \_\_\_\_\_

**Plantation**

Crops/Fruits: \_\_\_\_\_

Location: \_\_\_\_\_

Area of Plantation: \_\_\_\_\_

**Vacant Land and Buildings in Urban Areas or Urban Agglomeration**

Location of property: \_\_\_\_\_

Details of property: \_\_\_\_\_

Use to which it is put: \_\_\_\_\_

**Income /Wealth**

Annual family income from all Sources (including salaries &

Income from agriculture land): \_\_\_\_\_

Whether Tax Payer (if yes, a copy of the last 3 returns be furnished): ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No

Whether covered in wealth tax act (if Yes, Furnish details): ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No

Wealth Tax Details: \_\_\_\_\_

Any other remarks; \_\_\_\_\_

**Purpose :-** \_\_\_\_\_

**Declaration**

I do hereby declare that the information given by me in this application form is true to the best of my knowledge and I have suppressed / misrepresented any fact. That, I am solely responsible for the accuracy of the declaration and information furnished and shall be liable for the action under section 199, 200 and 420 of Indian Penal Code and other relevant laws / rules in case of furnishing wrong declaration and information. Also, I am well aware of the fact that the certificate shall be summarily cancelled and all the benefits availed by me shall be summarily withdrawn in case of furnishing wrong declaration and information.

I Agree :- \_\_\_\_\_

Place:- \_\_\_\_\_