

**ANNEXURE B**

**APPLICATION FORM FOR A CERTIFICATE FOR ELIGIBILITY FOR RESERVATION OF JOBS FOR OTHER BACKWARD CLASSES IN CIVIL POSTS AND SERVICES GOVERNMENT OF INDIA**

This form however, shall be used only as a Additional items, if necessary, may be incorporated to suit to the local situation in the form.

To,  
Deputy Collector of SDO  
\_\_\_\_\_–Goa.

I, request that a certificate in respect of reservations for other backward classes posts and services under Government of India be granted to me.

I give below the necessary particulars:

1. Full name of the Applicants :  
(In Block Letters)
2. Date of Birth :
3. Complete Residence Address :  
(a) Present  
(b) Permanent
4. Religion :
5. Caste :
6. Sub-Caste :
7. Occupation :
8. Serial Number of the Central  
List of OBC's :
9. Name of Father :
10. Name of Mother :
11. Name of Husband :
12. Status of Parent (S) Husband :

Father

Mother

(A) Constructional Post  
(1) Designation

(B) Government Service

- (i) Service (Central/State)
- (ii) Designation
- (iii) Scale of pay including  
Classification, if any,
- (iv) Date of appointment to  
the post
- (v) Age at the time of promotion  
To class I post ( if applicable)

II. Employment in International  
Organization e.g. UN  
UNICEP, WHO

- (i) Name of the organization
- (ii) Designation of Services
- (iii) Periods of Services  
(Indicate date from . \_\_\_\_\_ to \_\_\_\_\_ )

III. Death / Permanent Incapacitation (Omit if not applicable)

- (i) Date of Death /permanent  
Incapacitation putting an officer out of services
- (ii) Details of permanent incapacitation.

(C) Employment in public Sector Undertaking etc.

- (i) Name of the Organization
- (ii) Designation
- (iii) Date of Appointment to the post

( D ) Armed forces including pare-military Forces

(This will not include person holding civil post)

- (i) Designation
- (ii) Scale of pay

( E ) Professional Class (other than these covered in item Nos B & C ) and those  
engaged in trade, Business and Industry

- (i) Occupation / Profession

( F ) Property owner

(A) I. Agricultural Land Holding: owned by mother  
Father & minor, Children

- (i) Location
- (ii) Size of Holding
- (iii) (a) Irrigated  
(Type of Irrigated land )
  - (i)
  - (ii)
  - (iii)
  - (b)

- (iv) Percentage of irrigated land holding to statutory ceiling limit under state land ceiling laws
  - (v) If land holding is both irrigated/ unirrigated total irrigated land holding on the basis of conversion formula in State land Ceiling Law
  - (vi) Percentage of total irrigated land holding to statutory ceiling as per (iv)
- ( B ) Plantation :
- (i) Crops/ Fruits
  - (ii) Location
  - (iii) Area of Plantation
- ( C ) Vacant Land and /or building in Urban agglomeration
- ( a ) Location of Property
  - ( b ) Details of Property
  - ( c ) Use to which it is put
- ( G ) Income / Wealth
- ( i ) Annual Family Income from all Sources  
(Excluding salaries & Income from Agricultural Land )
  - ( ii ) Whether Tax Payer (Yes / No)  
(If yes a copy of last three year to be finished)
  - ( iii ) Whether covered in Wealth Tax Act (Yes/No)  
(if so furnish details)

13. Any other remarks

14. Certify that above said particulars are true to the best of my knowledge and belief and that I do not belong to the creamy layer of OBC's and eligible to be considered for posts reserved for OBC's. In any event of my information being found false or incorrect, or ineligibility being detected before or after the selection. I undersigned that my candidate/ appointment is liable to be cancelled and I shall be liable to such further action as may be provided under the law and or Rules.

Signature of the Candidate