



मोतीलाल नेहरू राष्ट्रीय प्रौद्योगिकी संस्थान इलाहाबाद
इलाहाबाद-२११००४ [भारत]
Motilal Nehru National Institute of Technology Allahabad
Allahabad-211004 [India]

TA Bill

Post applied for:

Roll number:

Name of the Candidate:

Father's Name:

Purpose of the visit:

Travel Details						
Departure		Arrival		Mode of Journey	Expenditure (Rs.)	Remarks / Ticket No.
Station	Date & Time	Station	Date & Time	Rail/ Road		
Total Amount (in Figures)						
Total Amount (in Words)						

(Signature of the claimant with date)

I certify that:

1. No concession was availed.
2. Journey was actually performed in the class for which claim has been made/performed.
3. Journey was performed by the shortest route (if not the reason) and in the interest of the institute.
4. Journeys by road were performed in hired conveyance/borrowed conveyance for which proper charges have been paid by me.
5. TA for the above journeys has not been drawn from any other sources

I certify that the information as given above are true and to best of my knowledge and belief.

(Signature of the claimant with date)

Name

Address:



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इलाहाबाद-२११००४ [भारत]
Motilal Nehru National Institute of Technology Allahabad
Allahabad-211004 [India]

Bank Details	
Account Holder Name	
Bank Account Number	
Bank Name	
Branch Address	
Branch Code	
IFSC Code	
Permanent Account Number	
Mobile No.	
Email ID	

(Signature of the claimant with date)

Head of Account :

Passed for payment/adjustment for

.....

Bill Asstt.

Supdt. (A/c)

Asstt./Dy Registrar

Registrar

Director

**FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR
ADMISSION TO CENTRAL EDUCATIONAL INSTITUTIONS (CEIs), UNDER THE GOVERNMENT OF INDIA**

This is to certify that Shri/Smt./Kum. _____
Son/Daughter of Shri/Smt. _____ of
Village/Town _____ District/Division _____ in the
_____ State belongs to the _____ Community
which is recognized as a backward class under:

- i. Resolution No. 12011/68/93-BCC(C) dated 10/09/93 published in the Gazette of India Extraordinary Part I Section I No. 186 dated 13/09/93.
- ii. Resolution No. 12011/9/94-BCC dated 19/10/94 published in the Gazette of India Extraordinary Part I Section I No. 163 dated 20/10/94.
- iii. Resolution No. 12011/7/95-BCC dated 24/05/95 published in the Gazette of India Extraordinary Part I Section I No. 88 dated 25/05/95.
- iv. Resolution No. 12011/96/94-BCC dated 9/03/96.
- v. Resolution No. 12011/44/96-BCC dated 6/12/96 published in the Gazette of India Extraordinary Part I Section I No. 210 dated 11/12/96.
- vi. Resolution No. 12011/13/97-BCC dated 03/12/97.
- vii. Resolution No. 12011/99/94-BCC dated 11/12/97.
- viii. Resolution No. 12011/68/98-BCC dated 27/10/99.
- ix. Resolution No. 12011/88/98-BCC dated 6/12/99 published in the Gazette of India Extraordinary Part I Section I No. 270 dated 06/12/99.
- x. Resolution No. 12011/36/99-BCC dated 04/04/2000 published in the Gazette of India Extraordinary Part I Section I No. 71 dated 04/04/2000.
- xi. Resolution No. 12011/44/99-BCC dated 21/09/2000 published in the Gazette of India Extraordinary Part I Section I No. 210 dated 21/09/2000.
- xii. Resolution No. 12015/9/2000-BCC dated 06/09/2001.
- xiii. Resolution No. 12011/1/2001-BCC dated 19/06/2003.
- xiv. Resolution No. 12011/4/2002-BCC dated 13/01/2004.
- xv. Resolution No. 12011/9/2004-BCC dated 16/01/2006 published in the Gazette of India Extraordinary Part I Section I No. 210 dated 16/01/2006.
- xvi. Resolution No. 12011/14/2004-BCC dated 12/03/2007 published in the Gazette of India Extraordinary Part I Section I No. 67 dated 12/03/2007.
- xvii. Resolution No. 12015/2/2007-BCC dated 18/08/2010.
- xviii. Resolution No. 12015/13/2010-BCC dated 08/12/2011.

Shri/Smt./Kum. _____ and / or his family
ordinarily reside(s) in the _____ District / Division of
_____ State. This is also to certify that he/she does not belong to the
persons/sections (Creamy Layer) mentioned in Column 3 of the Schedule to the Government of
India, Department of Personnel & Training O.M. No. 36012/22/93-Estt.(SCT) dated 08/09/93
which is modified vide OM No. 36033/3/2004 Estt.(Res.) dated 09/03/2004 and further modified
vide OM No. 36033/3/2004-Estt. (Res.) dated 14/10/2008 or the latest notification of the
Government of India.

Dated:

District Magistrate / Deputy Commissioner/
Competent Authority

Seal

NOTE:

- a) The term 'Ordinarily' used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.
- b) The authorities competent to issue Caste Certificates are indicated below:
 - i. District Magistrate / Additional Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / Ist Class Stipendiary Magistrate / Sub-Divisional magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner (not below the rank of Ist Class Stipendiary Magistrate).
 - ii. Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
 - iii. Revenue Officer not below the rank of Tehsildar' and
 - iv. Sub-Divisional Officer of the area where the candidate and / or his family resides.

**DECLARATION/UNDERTAKING
FOR OBC (Non-creamy Layer) CANDIDATES**

I, _____ son / daughter
of Shri _____ resident of village/town/city
_____ district _____ State
_____ hereby declare that I belong to the _____ community which
is 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 8/9/1993. 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 8/9/1993, which is modified vide Department of Personnel and
Training Office Memorandum No.36033/3/2004 Estt.(Res.) dated 9/3/2004 and further modified
vide OM No 36033/3/2004-Estt.(Res.) dated 14/10/2008 or the latest notification of the
Government of India.

I also declare that the condition of status/annual income for 'Creamy Layer' of my parents is
within prescribed limits as on financial year ending on March 31, 2012.

Signature of the Candidate

Place:

Date:

Declaration / undertaking not signed by Candidate will be rejected .

NOTE:

"The admission is provisional and is subject to the community certificate being verified through the proper channels. If the verification reveals that the claim of the candidate to belong to Other Backward Classes or not to belong to the creamy layer is false, his/her admission will be terminated forthwith without assigning any further reasons and without prejudice to such further action as may be taken under the provisions of the Indian Penal Code for production of false certificates."

FORM OF CASTE CERTIFICATE FOR SC/ST

This is to certify that Shri*/Shrimati/Kumari _____ Son/Daughter of
_____ Village/Town _____ /District/Division*
_____ of the _____ State/Union Territory belongs to the
_____ Caste*/Tribe which is recognised as a Scheduled Caste/Tribe under :

*The Constitution Scheduled Castes Order, 1950.

*The Constitution Scheduled Tribes Order, 1950.

*The Constitution (Scheduled Castes) (Union Territories) (Part C States) Order, 1951;

*The Constitution (Scheduled Tribes) (Union Territories) (Part C States) Order, 1951;

[As amended by the Scheduled Castes and Scheduled Tribes List (Modification Order, 1956, the Bombay Reorganisation Act, 1960, the Punjab Reorganisation Act, 1966, the State of Himachal Pradesh Act, 1970, the North Eastern Areas (Reorganisation) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 1976.]

The Constitution (Jammu and Kashmir) Scheduled Castes Orders, 1956.

The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959, as amended by the Scheduled Castes and Scheduled Tribes Orders (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) Orders (Amendment) Act, 1990.

*The Constitution (ST) Orders (Amendment) Ordinance Act, 1991.

*The Constitution (ST) Orders (Amendment) Ordinance Act, 1996.

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

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

*The 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.

This certificate is issued on the basis of the Scheduled Castes/Scheduled Tribes 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* _____ District/Division* of the State/Union Territory * of _____.

Place _____

Signature _____

Date _____

Designation _____

(with seal of Office)

State/Union Territory _____

* Please delete the words, which are not applicable.

@ Please quote specific Presidential Order

% Delete the Paragraph, which is not applicable

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

The following Officers are authorised to issue caste certificates :

1. District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector/1st Class Stipendary Magistrate/Sub Divisional Magistrate/Taluka Magistrate/Executive Magistrate/Extra Assistant Commissioner.
2. Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
3. Revenue Officer not below the rank of Tehsildar.
4. Sub-Divisional Officer of the area where the candidate and/or his family normally resides.
5. Certificates issued by Gazetted Officers of the Central or of a State Government countersigned by the District Magistrate concerned.
6. Administrator/Secretary to Administrator (Laccadive, Minicoy and Amindivi Islands).

**FORMAT OF DISABILITY CERTIFICATE
APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA**

NAME AND ADDRESS OF THE INSTITUTE / HOSPITAL

Certificate No.....

Date.....

**Recent Photograph
of the candidate
showing the
disability duly
attested by the
Chairperson of the
Medical Board**

This is certified that Shri / Smt. / Kum..... son / wife
/daughter of Shri..... Age

sex..... identification mark(s)..... is suffering from
permanent disability of following category:—

A. Locomotor or cerebral palsy:-

- i. BL-Both legs affected but not arms.
- ii. BA-Both arms affected
(a) Impaired reach
(b) Weakness of grip
- iii. BLA-Both legs and both arms affected
- iv. OL-One leg affected (right or left) (a) Impaired reach
(b) Weakness of grip
(c) Ataxic
- v. OA-One arm affected
(a) Impaired reach
(b) Weakness of grip
(c) Ataxic
- vi. BH-Stiff back and hips (Cannot sit or stoop)
- vii. MW-Muscular weakness and limited physical endurance.

B. Blindness or Low Vision:

- i. B-Blind
- ii. PB-Partially Blind

C. Hearing impairment:

- i. D-Deaf
- ii. PD-Partially Deaf
(Delete the category, whichever is not applicable)

2. This condition is progressive / non-progressive / likely to improve / not likely to improve. Re-assessment of this case is not recommended / is recommended after a period of.....years.....months.*
3. Percentage of disability in his / her case is.....percent.
4. Sh. / Smt. / Kum.....meets the following physical requirements for discharge of his / her duties:—

- | | |
|---|----------|
| i. F-can perform work by manipulating with fingers. | Yes / No |
| ii. PP-can perform work by pulling and pushing. | Yes / No |
| iii. L-can perform work by lifting. | Yes / No |
| iv. KC-can perform work by kneeling and crouching. | Yes / No |
| v. B-can perform work by bending. | Yes / No |
| vi. S-can perform work by sitting. | Yes / No |
| vii. ST-can perform work by standing. | Yes / No |
| viii. W-can perform work by walking. | Yes / No |
| ix. SE-can perform work by seeing. | Yes / No |
| x. H-can perform work by hearing / speaking. | Yes / No |
| xi. RW-can perform work by reading and writing. | Yes / No |

(Dr)

**Member
Medical Board**

(Dr)

**Member
Medical Board**

(Dr)

**Chairperson
Medical Board**

Countersigned by the
Medical Superintendent ICMO /
Head of Hospital (with seat)

* Strike out which is not applicable.