OFFICE OF THE PRINCIPAL CHIEF COMMISSIONER OF CGST & CENTRAL EXCISE ZONE LUCKNOW,
7-A, ASHOK MARG, LUCKNOW-226001

Recruitment of Meritorious Sportspersons under Sports Quota

Applications are invited from meritorious sportsperson in 65 disciplines mentioned in the list in Para A IV of DoPT Office Memorandum No. DOPT-1720781414772 dated 04.03.2024 for the recruitment under Sports Quota in the following grade:

Sl. No.	Name of the Post	No. of vacancies	Pay (As per 7th CPC)
1	Tax Assistant	03	Level – 4 in the pay matrix (Rs. 25,500 – Rs. 81,100)
2	Havaldar	14	Level – 1 in the pay matrix (Rs. 18,000 – Rs. 56,900)

Eligibility for consideration:
Sportsperson having represented-

i. a State or the country in the National or International competition; or Medal winners in Junior National Championships; or Medal winners in Khelo India Youth Games (age category above 18 years); or Khelo India Winter Games; or Khelo India Para Games; or Medal winners in Khelo India University Games; or Medal winners in School Games Federation of India (SGFI) in any of the games/sports mentioned above.

For Chess: Grand Master (GM) Title, International Master (IM) Title, Chess Olympiad. IM/GM title should be in Open Category like Woman Grandmaster (WGM) etc. While National Open Chess Championship is treated as National Championships, the medal winning performance in National Team Chess Championship will also be considered for recruitment.

ii. Their University in the Inter-University Tournaments conducted by the Inter-University Sports Boards in any of the sports/games mentioned above.

iii. The State School Teams in the National Sports/games for schools conducted by the All India School Games Federation in any of the games/sports mentioned above.

Further, details regarding educational qualifications, proforma for submission of applications and other eligibility conditions are available on the Central Board of Indirect Taxes Departmental official website **https://www.cbic.gov.in** and on the Central Tax, website **https://ccolkozone.gov.in.**

The willing and eligible applicants may send their applications in the prescribed proforma by 23.11.2026 (17.00 hrs) either by post or by hand [another ten (10) days for applicants domiciled in North Eastern states, Andaman & Nicobar Islands, Lakswadweep, Jammu & Kashmir and Ladakh] addressed to the Additional Commissioner (CCA), Office of The Principal Chief Commissioner of CGST & Central Excise Lucknow Zone, 7-A, Ashok Marg, Lucknow-226001.

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GAURAV CHANDEL
Date: 08-10-2026
15:49:31

Additional Commissioner (CCA)

Details/Instructions to Recruitment under Sports Quota

Recruitment of Meritorious Sportsperson in the office of Principal Chief Commissioner, CGST & Central Excise, Lucknow Zone, Lucknow

The Chief Commissioner of CGST & Central Excise Lucknow Zone invites applications for the recruitment of Meritorious Sportsperson in the following disciplines:

S. No.	Name of the Sport	S. No.	Name of the Sport	S. No.	Name of the Sport
1	Archery	23	Handball	45	Rowing
2	Athletics	24	Hockey	46	Rugby
3	Atya-Patya	25	Ice-Hockey	47	Sepak Takraw
4	Badminton	26	Ice-Skating	48	Soft Ball
5	Ball-Badminton	27	Ice-Skiing	49	Soft Tennis
6	Baseball	28	Judo	50	Squash
7	Basket Ball	29	Kabaddi	51	Swimming
8	Billiards & Snookers	30	Karate	52	Table Tennis
9	Body-Building	31	Kayaking & Canoeing	53	Taekwondo
10	Boxing	32	Kho – Kho	54	Tenni-Koit
11	Bridge	33	Kudo	55	Tennis
12	Carrom	34	Mallakhamb	56	Tenpin Bowling
13	Chess	35	Motor Sports	57	Triathlon
14	Cricket	36	Net Ball	58	Tug-of-war
15	Cycling	37	Para Sports (For Sports discipline included in Para Olympics and para Asian Games)	59	Volleyball
16	Cycle Polo	38	Pencak Silat	60	Weightlifting
17	Deaf Sports	39	Polo	61	Wushu
18	Equestrian	40	Power Lifting	62	Wrestling
19	Fencing	41	Shooting	63	Yachting
20	Football	42	Shooting Ball	64	Tennis Ball Cricket
21	Golf	43	Roll Ball	65	Yogasana
22	Gymnastics	44	Roller Skating		

2. Post wise number of vacancies for recruitment are mentioned in the table below:-

Sl. No.	Name of the Post	No. of Posts	Pay (As per 7th CPC)
1	Tax Assistant	03	Level – 4 in the pay matrix (Rs. 25,500 – Rs. 81,100)
2	Havaldar	14	Level – 1 in the pay matrix (Rs. 18,000 – Rs. 56,900)

3. Eligibility Conditions

i. **Age Limit**:

The candidate must be of 18 to 27 years of age on 23.11.2026. Relaxation in upper age

limit by five (5) years shall be allowed in each case. In addition, relaxation in upper age limit of five years shall be allowed only to candidates belonging to Scheduled Cast (SC)/Scheduled Tribe (ST) in each case. Accordingly, total 10 Years of age relaxation is allowed to candidates belonging to SC/ST only. Although additional age relaxation as mentioned above shall be provided to SC/ST candidates, no post shall be reserved for any category of candidates.

Note:- *Age relaxation as mentioned above will be admissible only to those sportspersons, who satisfy all other eligibility conditions related to education and sports qualifications, backed by a certificate in the prescribed form, from an authority, as detailed in this Notification.*

(ii) Educational Qualification:

Post	Educational and other Qualification required
Tax Assistant	1. Bachelor's Degrees of a recognized University or equivalent. 2. Possess a speed of not less than 8000 key depressions per hour for data entry work.
Havaldar	1. Matriculation or equivalent from any recognized Board. **Note:** Candidates will be required to possess the physical standards and pass physical tests as specified below, namely:- **For Male Candidates:-** Physical standard (minimum) **Height** - 157.5 Cms (relaxable by 5 Cms in the case of Garhwalis, Assamese, Gorkhas and members of the Schedule Tribes) **Chest**-81 Cms (fully expanded with minimum expansion of 5 Cms) **Physical Test:** Walking- 1600 Meters in 15 minutes **For Female Candidates:-** Physical standard (minimum) **Height** - 152 Cms ; **Weight**- 48 Kgs. (Height relaxable by 2.5 Cms and weight by 2 Kgs. in the case of Garhwalis, Assamese, Gorkhas and members of the Schedule Tribes) **Physical Test:** Walking-1 km in 20 minutes.

iii. Sports Eligibility:

Appointment can be made of a sportsperson considered meritorious with reference to the following criteria:-

<u>Sportsperson having represented-</u>

i. a State or the country in the National or International competition; or Medal winners in Junior National Championships; or Medal winners in Khelo India Youth Games (age category above 18 years); or Khelo India Winter Games; or Khelo India Para Games; or Medal winners in Khelo India University Games; or Medal winners in School Games Federation of India (SGFI) in any of the games/sports mentioned in the DoPT office Memorandum No. DOPT-1720781414772 dated 04.03.2024.

For Chess: Grand Master (GM) Title, International Master (IM) Title, Chess Olympiad.

IM/GM title should be in Open Category like Woman Grandmaster (WGM) etc. While National Open Chess Championship is treated as National Championships, the medal winning performance in National Team Chess Championship will also be considered for recruitment.

ii. Their University in the Inter-University Tournaments conducted by the Inter-University Sports Boards in any of the sports/games specified in DoPT Office Memorandum No. DOPT-1720781414772 dated 04.03.2024.

iii. The State School Teams in the National Sports/games for schools conducted by the All India School Games Federation in any of the games/sports mentioned in DoPT office Memorandum No. DOPT-1720781414772 dated 04.03.2024.

4. **Evidence in support of merit in Sports Events/Games**

Only certificates awarded by the authorities hereunder will be taken into account as evidence in support of having participated in competitions in any of the above Sports events/Games mentioned in para 1 above while considering eligibility of the applicant. The applicant may submit self-attested copies of at least one merit certificate issued by one of the authorities mentioned hereunder along with the application:-

Sl. No.	Competition	Authority awarding Certificate	Form in which certificate is to be awarded
1	International Competition	Secretary of the National Federation of the Game concerned.	Form-1
2	National Competition	Secretary of the National Federation or Secretary of the State Association of the Game concerned.	Form-2
3	Inter-University Tournaments	Dean of Sports or other officer in overall charge of sports of the University concerned.	Form-3
4	National/Sports/ Games for Schools	Director or Additional/Joint or Deputy Director in overall charge of sports/games for Schools in the Directorate of Public Instructions/Education of the State.	Form-4
5	Khelo India University Games/ Khelo India Youth Games/ Khelo India Winter Games/Khelo India Para Games	Officer designated/Officer in-charge from Sports Authority of India (SAI) for Khelo India University/ Khelo India Youth Games/ Khelo India Winter Games/Khelo India Para Games.	Form-5

The applicant is required to submit the forms 1, 2, 3, 4, & 5 (whichever applicable) complete in all respects. The specimens of the said forms are mentioned at Annexure B hereinafter.

5. **Selection of the Applicants**

i. Subject to fulfilling of the qualification at para 3 (ii) herein above, the applications shall be scrutinized and suitable applicants will be shortlisted for further selection procedure.

Success in the above test confers no right to appointment unless the Department is

satisfied after such enquiry, as may be considered necessary that the applicant is suitable in all respect for appointment to the post.

ii. The merit of Sportspersons, who fulfil the aforesaid eligibility conditions, shall be considered/decided in the order of preference as below-

a. First preference to those candidates who have represented the country in an International Competition with the clearance of the Department of Sports, Ministry of Youth Affairs and Sports.
b. Next preference may be given to those who have represented a State/U.T. in the Senior or Junior level national Championships organized by the National Sports Federations recognized by Department of Sports, Ministry of Youth Affairs & Sports or National Games organized by Indian Olympics Association and have won medals or positions upto 3rd place. Between the candidates participating in Senior and Junior National Championships/games, the candidates having participated and won medal in Senior National Championship should be given preference.
c. Next preference may be given to those, who have represented a University in an Inter-University competition conducted by Association of Indian Universities/Inter University Sports Board Or Khelo India University Games conducted with authorization of Department of Sports, Ministry of Youth Affairs and Sports and have won medals or positions upto 3rd place in finals.
d. Next preference may be given to those who have represented a State/UT in Khelo India Youth Games (age category above 18 years) or Khelo India Winter Games or Khelo India Para Games conducted with authorization of Department of Sports, Ministry of Youth Affairs and Sports and have won medals or positions upto 3rd place in finals.
e. Next preference may be given to those who have represented the State Schools in the National sports/games for Schools conducted by the All-India School Games Federation and have won medals or positions upto 3rd place.
f. Next preference may be given to those who represented a State/Union Territory/University/State Schools Teams at the level mentioned in categories (b) to (e) but could not win a medal or position, in the same order of preference.

Note 1: *In the event of tie those who have secured a higher position or won more than one medal may be given the preference.*
Note 2: *Participation in individual and team event/item may be given the same preference.*
Note 3: *No preference may be given for winning more than one medal/position.*
Note 4: *In case of any doubt about the status of a tournament, the matter will be decided by the Department of Personnel & Training in consultation with Department of Sports, Ministry of Youth Affairs and Sports.*

iii. The shortlisted candidates will be called for data entry speed test in case they have applied for the post of Tax Assistant. Similarly, the shortlisted candidates will be called for Physical Standards & Physical Efficiency Test in case they have applied for the post of Havaldar as mentioned at para 3 (ii) above.

6. **Documents to be attached**

Self-attested copies of the following certificates are to be enclosed/affixed along with the application and no originals to be enclosed along with the application.

i. Matriculation/SSC or equivalent certificate for proof of age
ii. Education qualification certificate
iii. Relevant Forms for Sports/games certificates as mentioned in Annexure-B (Form-1, Form-2, Form-3, Form-4, Form-5).
iv. NOC from the present employer, if applicable
v. Identity proof (copy of Aadhar Card/PAN CARD, Driving License, Passport, any other identity card issued by Central/State Government authorities)

vi. Caste certificate issued by Central/State Government authorities (if applicable).
vii. Recent colour Passport Size Photo (to be affixed on the application form)
viii. Persons with Benchmark Disabilities (PwBD) certificate (if applicable).

7. General Instructions to the applicants

(i) The applicant has to go through the notification, eligibility criteria, instruction to candidates, vacancy positions, other conditions and instructions etc., carefully before filling up the application form in the given format.

(ii) Recent colour passport size photograph should be affixed on the Application in the space provided for the said purpose.

(iii) Application not containing the required details/enclosures, or which are incomplete and/or unsigned will not be entertained/considered.

(iv) Failure to comply with the instructions/conditions prescribed in this recruitment advertisement/notice will result in rejection of the application, and no such intimation will be served, nor any communication in this regard will be entertained.

(v) The candidate can apply for more than one post in a single application form, but **only one application should be submitted by the candidate**. If any candidate submits more than one application, all such applications will be summarily rejected.

(vi) If applicant is applying for both post in a single application form, the applicant should clearly indicate the preference of the posts in the application form to which he/she is applying as first preference, second preference.

(vii) Failure to indicate the posts in the column "Post applied for" will make the application liable for rejection without any further correspondence.

(viii) Candidates seeking relaxation benefits must ensure that they are entitled to such relaxation as per the eligibility prescribed in the notification and furnish relevant documents in support of the same.

(ix) Copy of the Caste Certificate for SC/ST category and OBC category candidates in the prescribed form (Prescribed for appointment under Government of India) from the competent authority is to be enclosed along with the application form. Format of the Caste Certificate for SC/ST category and OBC category candidates is enclosed as Annexure-C & Annexure D respectively.

(x) Further, there should be no ongoing investigation against the candidate regarding Doping or using unfair means of any nature to compete or win in any of Sporting event. A declaration to this effect must be given by the candidate.

(xi) The certificates of sports achievements submitted in any other form, or from authorities other than those detailed in para 4 above, will be ignored.

(xii) Sportsperson who are already employed in Central Government or State Government departments/organization or PSUs should furnish an NOC from the present employer.

(xiii) In case of Persons with Benchmark Disabilities (PwBD)-

a. The disability conditions falling under the category "likely to improve" under temporary disability category, are not eligible for reservation
b. The conditions i.e. "progressive, non-progressive or not likely to improve" be treated eligible for reservation.

8. Terms and Conditions governing the application: -

a. The applicant must be in possession of the requisite educational qualification for the concerned post on the closing date of submission of the application form.
b. The application form as per Annexure 'A' duly filled in all respects should be submitted in a closed cover super scribed with words "Application for Meritorious Sportsperson in CGST & Central Excise Lucknow Zone 2026" and addressed to:

The Additional Commissioner (CCA),
Office of the Principal Chief Commissioner of CGST & Central Excise,
Lucknow Zone, 7-A, Ashok Marg, Lucknow-226001

c. Cut-off date for determining the age and other eligibility criteria be 23.11.2026.
d. Data Entry test and Physical Efficiency/Physical Standard test will be held in Luckn ow. The shortlisted candidates will be required to appear for the same at their own expenses and the date, time and venue of such tests will be communicated in the course of time.
e. The Selected candidate are liable to be posted anywhere under the jurisdiction of Cadre Control Authority Lucknow (Lucknow Zone & Meerut Zone spread over Uttar Pradesh & Uttarakhand.
f. The selected candidates will be under probation for 2 years or such period as per the extant instructions of the Government of India. The selected candidates will be required to represent the Central GST, Central Excise and Customs, Lucknow Zone including Meerut Zone, in the tournament/meets as decided by this office.
g. In the event of any tie the decision of the appointing authority will be final.
h. The Chief Commissioner of CGST & Central Excise, Lucknow Zone (CCA) has the right to cancel the recruitment process, at any stage without assigning any reason thereof.
i. Any form of canvassing by any candidate will render his/her candidature liable to be rejected summarily at any stage of the recruitment process.
j. The selected candidates should produce all the relevant certificates in original for verification at the time when they are called for.
k. Medical fitness of the candidates will be ascertained before their formal appointment.
l. If at any stage during the recruitment process, the candidate is found to have furnished any wrong information, statement or declaration or falsified/misrepresented any facts, his/her candidature/appointment will be liable for cancellation.
m. This recruitment is subject to applicable Rules for recruitment of meritorious sports persons, issued by Government of India from time to time.
n. For update please visit **https://www.cbic.gov.in** and **https://ccolkozone.gov.in** regularly.

Enclosures:-

i. **Annexure-A:** Application form.
ii. **Annexure-B:** Form-1, Form-2, Form-3, Form-4 & Form-5.
iii. **Annexure-C:** Format of Cast Certificate for SC/ST Category.
iv. **Annexure-D:** Format of Cast Certificate for OBC Category.
v. **Annexure-E:** Format of PwBD Certificate

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GAURAV CHANDEL
Date: 13-10-2026
18:05:09

Additional Commissioner (CCA)
CGST & Central Excise,
Lucknow Zone, Lucknow

ANNEXURE-A

APPLICATION FOR RECRUITMENT OF MERITORIOUS SPORTSPERSONS IN THE OFFICE OF THE PRINCIPAL CHIEF COMMISSIONER OF CGST & CENTRAL EXCISE (LUCKNOW ZONE) FOR THE YEAR 2026

Affix latest passport size colour photographof the candidate

(i) **Post applied for**: (Please Tick the relevant Box)

Tax Assistant: [ ]

Havaldar: [ ]

Both: [ ]

(ii)Mention the preference for the post, if applied for both:

1.

2.

(Please fill the form in the black ink in Capital letters)

A) Full Name	In Hindi	
	In English	
B) Father's Name		
C) Gender (Male/Female/Third gender)		
D) Permanent Residential Address		
E) Address for communication		
F) Date of birth (DD/MM/YYYY)		
G) Age (as on 23.11.2026)		
H) Category-UR/OBC/SC/ST		
I) PwBD Candidate (Yes/No) (if yes, mention the category)		
J) Educational Qualification		
K) Sports event/game		

L) Level of Representations in games/sports [Please submit the forms 1, 2, 3, 4 & 5 (whichever applicable) as detailed at annexure B complete in all respects in all the events participated/medal awarded]

Level	No. of medals awarded	Position earned/ Represented
a)International		

b) National		
c) Inter-University		
d) Khelo India		
e) Any Other event		
f)Latest performance in Sports		
M) Documents to be submitted (self-attested) (Please Tick the enclosed documents):	a) Educational Qualification certificate b) Age proof (SSC/matriculation certificate) c) Relevant Forms for Sports/games certificates as mentioned in Annexure-B d) Identity proof (copy of Aadhar Card/PAN Card, Driving License, Passport, any other identity card issued by Central/State Government authorities) e) Caste Certificate (in case of OBC/SC/ST candidates) f) NOC from the present employer, if applicable g) Benchmark disability Certificate (PwBD)	
N) Telephone No./Mob. No.		
O) E-mail id(if any)		
P) Aadhaar number		
Q) Details of present employer, if any		

DECLARATION

I hereby declare that all statements made in the application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being false or incorrect or ineligibility being detected before or after the test/interview, my candidature/appointment is liable to be cancelled /terminated. I have not submitted any other application for this post. I am aware that if I contravene this rule, my application can be rejected by the Department.

I further declare that there is no ongoing investigation against me regarding Doping or using unfair means of any nature to compete or win in any of Sporting event. I fulfill all the conditions of eligibility regarding age limit, educational qualification & sports eligibility etc, prescribed for the post.

Place: Signature of the Applicant:

Date: Full Name:

ANNEXURE 'B'

FORM I

(for representing India in an international Competition in one of the recognized Games/Sports).

NATIONAL FEDERATION / NATIONAL ASSOCIATION OF ____

Certificate to meritorious sportsmen for employment to Group C & D Service under the CentralGovernment

Certified that Shri/Smt./Kumar_____ Son/Wife/Daughter of Shri_____resident of

_____represented the
(complete address)

country in the game/event of_____in _____competition/Tournament held at _____from_____to_____.

The position obtained by the individual/team in the above said Competition/Tournament was_____.

The Certificate is being given on the basis of record available in the office of the State Association of_____.

Place_____

Signature_____

Date_____

Name _____

Designation_____

Name of the Federation/National Association_____

Address_____

Seal_____

Note: This Certificate will be valid only when signed personally by the Secretary, National Federation/National Association.

(Annexure B of the Department of Personnel and Administrative Reforms O.M. No. 14015/1/78-Estt(D) dated 4th August, 1980)

ANNEXURE 'B'

FORM:-2

(for representing a State in India in a Nation competition in one of the recognized Games/Sports.)

STATE ASSOCIATION OF_____IN THE GAME_____OF_____

Certificate to a meritorious sportsman for employment to a Group C & D service under theCentral Government

Certified that Shri/Smt./Kumar_____ son/wife/daughter of Shri_____resident of _____represented the State of
(complete address)

_____in the game/event of _____in the National Competition/Tournament held at _____from_____to_____.

The position obtained by the individual /team in the above said Competition/Tournament was_____.

The certificate is being given on the basis of record available in the office of the State Association of_____.

Place_____

Signature_____

Date_____

Name _____

Designation_____

Name of the State Association

_____

Address_____

Seal_____

Note: This Certificate will be valid only when signed personally by the Secretary of the State Association.

(Annexure B of the Department of Personnel and Administrative Reforms O.M. No. 14015/1/78-Estt(D) dated 4th August, 1980)

ANNEXURE 'B'

FORM 3

(For representing a University in the Inter-University Competition in one of the recognized Games/sports).

UNIVERSITY OF _____

Certificate to a meritorious sportsman for employment to a Group C&D service under theCentral Government

Certified that Shri/Smt./Kumari_____
Son/Wife/Daughter of Shri_____
Resident of_____student of _____
Represented the University of_____in Inter the game/event of _____in Inter-University Competition/Tournament held at _____
from_____to_____.

The position obtained by the individual/team in the above said competition/tournament was_____.

The certificate is being given on the basis of records available in the office of Dean of Sports or Officer in overall charge of sports in the University of _____
.

Place_____

Date_____

Signature_____
Name _____

Designation_____

Name of the University:

_____
Address_____

Seal_____

Note: This Certificate will be valid only when signed personally by Dean/Director or other officer in overall charge of sports in the University of _____

(Annexure B of the Department of Personnel and Administrative Reforms O.M. No. 14015/1/78-Estt(D) dated 4th August, 1980)

ANNEXURE 'B'

FORM 4

DIRECTORATE OF PUBLIC INSTRUCTIONS/EDUCATION OF THE STATE OF ___

Certificate to a meritorious sportsman for employment to a Group C & D services under theCentral Government

Certified thatShri/Kumari_____ son/daughter of Shri_____resident of_____student of _____
(Complete address)
Represented the_____State School Team in the game/event of_____in the National Games for schools held at_____from_____to_____.

The position obtained by the individual/team in the above said Competition/Tournament was _____.

The certificate is being given on the basis of records available in the office of Directorate of Public Instructions/education of_____.

Place_____

Signature_____

Date_____

Name _____

Designation_____

Address_____

Seal_____

Note: This Certificate will be valid only when signed personally by the Director or Additional/Joint or Deputy Director in overall charge of sports/games/for Schools in the Directorate of Public Instruction/Education of the State.

(Annexure B of the Department of Personnel and Administrative Reforms O.M. No. 14015/1/78-Estt(D) dated 4th August, 1980

ANNEXURE 'B'

FORM 5

DIRECTORATE OF PUBLIC INSTRUCTIONS/EDUCATION OF THE STATE OF ___

Certificate to a meritorious sportsman for employment to a Group C service under the Central Government

Certified that Shri/Kumari_____ son/wife/daughter of Shri_____resident of _____student of _____

Represented the Univerisity/Institute/School of_____ _____in the game/event of _____ _____ in Khelo India University Games/Khelo India Youth Games/Khelo India Winter Games/Khelo India Para Games held at __ _____ from _____ to _____.

The position obtained by the individual/team in the above said Competition/Tournament was _____.

The certificate is being given on the basis of records available in the office.

Place_____

Signature_____

Date_____

Name _____

Designation_____

Address_____

Seal_____

Note: This Certificate will be valid only when signed personally by the officer designated/officer in charge from Sports Authority of India for Khelo India University/Khelo India Youth Games/Khelo India Winter Games/Khelo India Para Games.

FORMAT FOR SC/ ST CERTIFICATE

A candidate who claims to belong to one of the Scheduled Caste or the Scheduled Tribes should submit in support of his/ her claim an attested/certified copy of a 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 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 parents are dead, the officer signing the certificate should be of the district in which the candidate himself ordinarily resides otherwise than for the purpose of his own education. Wherever photograph is an integral part of the certificate, the Commission would accept only attested photocopies of such certificates and not any other attested or true copy.

(The format of the certificate to be produced by Scheduled Castes and Scheduled Tribes candidates applying for appointment to posts under 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/Tribes_____ which is recognized as a Scheduled Castes/Scheduled Tribes* 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 Lists(Modification) order, 1956, the Bombay Reorganization Act, 1960 & the Punjab Reorganization Act, 1966, the State of Himachal Pradesh Act 1970, the North-Eastern Area(Reorganization) Act, 1971 and the Scheduled Castes and Scheduled Tribes Order(Amendment) Act, 1976.

The Constitution (Jammu & Kashmir) Scheduled Castes Order, 1956_____
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 (Scheduled Tribes) (Uttar Pradesh) Order, 1967 @
The Constitution (Goa, Daman & Diu) Scheduled Castes Order, 1968@
The Constitution (Goa, Daman & 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 1991@

The Constitution (ST) orders (Second Amendment) Act, 1991@
The Constitution (ST) orders (Amendment) Ordinance 1996@
The Scheduled Caste and Scheduled Tribe Orders (Amendment) Act 2002@
The Constitution (Scheduled Caste) Orders(Amendment) Act 2002@
The Constitution(Scheduled Caste and Scheduled Tribe) Orders (Amendment) Act 2002@
The Constitution (Scheduled Caste) Order (Amendment) Act 2007@
%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 belong to the _____ Caste/Tribe which is recognized 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 _____ District/Division* _____of the State/Union Territory of _____

Signature_____

** Designation_____

(with seal of office)

Place_____

Date_____

* Please delete the words which are not applicable

@ Please quote specific presidential order

% Delete the paragraph which is 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 Caste/Tribe Certificates**:

(i) District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Dy.Collector/Ist Class Stipendiary Magistrate/Sub-Divisional Magistrate/Extra-Assistant Commissioner/Taluka Magistrate/Executive Magistrate.

(ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.

(iii) Revenue Officers not below the rank of Tehsildar.

(iv) Sub-Divisional Officers of the area where the candidate and/or his family normally resides.

NOTE: ST candidates belonging to Tamil Nadu State should submit caste certificate ONLY FROM THE REVENUE DIVISIONAL OFFICER.

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

This is to certify that Shri/Smt./Kumari _____son/daughter of _____ of village/town _____

in District/Division _____ in the State/Union Territory _____ belongs to the _____ Community which is recognized as a backward class under the Government of India, Ministry of Social Justice and Empowerment's Resolution No. _____ dated _____*. Shri/Smt./Kumari _____ and/or his/her family ordinarily reside(s) in the _____ District/Division of the _____ State/Union Territory. 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 8.9.1993**.

District Magistrate: _____

Deputy Commissioner etc.: _____

Dated:

Seal:

* The authority issuing the certificate may have to mention the details of Resolution of Government of India, in which the caste of the candidate is mentioned as OBC.

** As amended from time to time.

Note: The term "Ordinarily" used here will have the same meaning as in Section 20 of the Representation of the People Act,1950.

Annexure-E

Form-VI Certificate of Disability

(In cases of amputation or complete permanent paralysis of limbs or dwarfism and in case of blindness)

[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 a disability.

Certificate No. Date:

This is to certify that I have carefully examined Shri/Smt./Kum. _____son/wife/daughter of Shri _____Date of Birth (DD/MM/YY) _____age _____years, male/ female _____ registration No. _____permanent resident of House No. _____ Ward/Village/Street _____Post Office _____District _____State _____, whose photograph is affixed above, and am satisfied that:

(A) he/she is a case of:

- locomotor disability
- dwarfism
- blindness

(Please tick as applicable)

(B) the diagnosis in his/her case is _____

(C) he/she has _____% (in the figure) _____percent (in words) permanent locomotor disability/dwarfism/blindness in relation to his/her _____(part of body) as per guidelines (..... number and date of issue of the guidelines to be specified).

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

Nature of Document	Date of Issue	Details of authority issuing certificate

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

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

Annexure-E

Form - VII 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.

Certificate No. Date:

This is to certify that we have carefully examined Shri/Smt./Kum. _____son/wife/daughter of Shri _____Date of Birth (DD/MM/YY) _____ Age _____years, male/female _____.

Registration No. _____permanent resident of House No. _____ Ward/Village/Street _____Post Office _____District _____State _____, whose photograph is affixed above, and am satisfied that:

(A) he/she is a case of Multiple Disability. His/her extent of permanent physical impairment/disability has been evaluated as per guidelines (.....number and date of issue of the guidelines to be specified) for the disabilities ticked below, and is shown against the relevant disability in the table below:

S. No	Disability	Affected part of body	Diagnosis	Permanent physical impairment/mental 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. Speech and Language disability

12. Intellectual Disability

13. Specific Learning Disability

14. Autism Spectrum Disorder

15. Mental illness

16. Chronic Neurological Conditions

17. Multiple sclerosis

18. Parkinson's disease

19. Haemophilia

20. Thalassemia

21. Sickle Cell Disease

(B) In the light of the above, his/her overall permanent physical impairment as per guidelines (number and date of issue of the guidelines to be specified), is as follows:

In figures _____percent
In words: _____percent

2. This 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)

@ e.g., Left/right/both arms/legs
# e.g., Single eye
£ e.g., 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

5. Signature and seal of the Medical Authority.

Name and Seal of Member Name and Seal of Member Name and Seal of the Chairperson

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

Annexure-E

Form – VIII Certificate of Disability

(In cases other than those mentioned in Forms VI and VII)

(Name and Address of the Medical Authority issuing the Certificate) (See rule 18(1))

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

Certificate No. Date:

This is to certify that I have carefully examined

Shri/Smt./Kum. _____son/wife/daughter of Shri _____Date of Birth (DD/MM/YY)_____ _____Age _____years, male/female _____Registration No. _____permanent resident of House No. _____Ward/Village/Street _____Post Office _____District _____ State _____, whose photograph is affixed above, and am satisfied that he/she is a case of disability. His/her extent of percentage physical impairment/disability has been evaluated as per guidelines (number and date of issue of the guidelines to be specified) and is shown against the relevant disability in the table below:

S. No	Disability	Affected part of body	Diagnosis	Permanent physical impairment/mental 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 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 applicable)

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) _____

@ - e.g., Left/Right/both arms/legs # - e.g.,
Single eye/both eyes
€ - e.g., 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

(Authorized 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 issued

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.

ANNEXURE-A

APPLICATION FOR RECRUITMENT OF MERITORIOUS SPORTSPERSONS IN THE OFFICE OF THE PRINCIPAL CHIEF COMMISSIONER OF CGST & CENTRAL EXCISE (LUCKNOW ZONE) FOR THE YEAR 2026

Affix latest passport size colour photographof the candidate

(i) **Post applied for**: (Please Tick the relevant Box)

Tax Assistant: [ ]

Havaldar: [ ]

Both: [ ]

(ii)Mention the preference for the post, if applied for both:

1.

2.

(Please fill the form in the black ink in Capital letters)

A) Full Name	In Hindi	
	In English	
B) Father's Name		
C) Gender (Male/Female/Third gender)		
D) Permanent Residential Address		
E) Address for communication		
F) Date of birth (DD/MM/YYYY)		
G) Age (as on 23.11.2026)		
H) Category-UR/OBC/SC/ST		
I) PwBD Candidate (Yes/No) (if yes, mention the category)		
J) Educational Qualification		
K) Sports event/game		

L) Level of Representations in games/sports [Please submit the forms 1, 2, 3, 4 & 5 (whichever applicable) as detailed at annexure B complete in all respects in all the events participated/medal awarded]

Level	No. of medals awarded	Position earned/ Represented
a)International		

b) National		
c) Inter-University		
d) Khelo India		
e) Any Other event		
f)Latest performance in Sports		
M) Documents to be submitted (self-attested) (Please Tick the enclosed documents):	a) Educational Qualification certificate b) Age proof (SSC/matriculation certificate) c) Relevant Forms for Sports/games certificates as mentioned in Annexure-B d) Identity proof (copy of Aadhar Card/PAN Card, Driving License, Passport, any other identity card issued by Central/State Government authorities) e) Caste Certificate (in case of OBC/SC/ST candidates) f) NOC from the present employer, if applicable g) Benchmark disability Certificate (PwBD)	
N) Telephone No./Mob. No.		
O) E-mail id(if any)		
P) Aadhaar number		
Q) Details of present employer, if any		

DECLARATION

I hereby declare that all statements made in the application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being false or incorrect or ineligibility being detected before or after the test/interview, my candidature/appointment is liable to be cancelled /terminated. I have not submitted any other application for this post. I am aware that if I contravene this rule, my application can be rejected by the Department.

I further declare that there is no ongoing investigation against me regarding Doping or using unfair means of any nature to compete or win in any of Sporting event. I fulfill all the conditions of eligibility regarding age limit, educational qualification & sports eligibility etc, prescribed for the post.

Place: Signature of the Applicant:

Date: Full Name:

ANNEXURE 'B'

FORM I

(for representing India in an international Competition in one of the recognized Games/Sports).

NATIONAL FEDERATION / NATIONAL ASSOCIATION OF ____

Certificate to meritorious sportsmen for employment to Group C & D Service under the CentralGovernment

Certified that Shri/Smt./Kumar_____ Son/Wife/Daughter of Shri_____resident of

_____represented the
(complete address)

country in the game/event of_____in _____competition/Tournament held at _____from_____to_____.

The position obtained by the individual/team in the above said Competition/Tournament was_____.

The Certificate is being given on the basis of record available in the office of the State Association of_____.

Place_____

Signature_____

Date_____

Name _____

Designation_____

Name of the Federation/National Association_____

Address_____

Seal_____

Note: This Certificate will be valid only when signed personally by the Secretary, National Federation/National Association.

(Annexure B of the Department of Personnel and Administrative Reforms O.M. No. 14015/1/78-Estt(D) dated 4th August, 1980)

ANNEXURE 'B'

FORM:-2

(for representing a State in India in a Nation competition in one of the recognized Games/Sports.)

STATE ASSOCIATION OF_____IN THE GAME_____OF_____

Certificate to a meritorious sportsman for employment to a Group C & D service under theCentral Government

Certified that Shri/Smt./Kumar_____ son/wife/daughter of Shri_____resident of _____represented the State of
(complete address)

_____in the game/event of _____in the National Competition/Tournament held at _____from_____to_____.

The position obtained by the individual /team in the above said Competition/Tournament was_____.

The certificate is being given on the basis of record available in the office of the State Association of_____.

Place_____

Signature_____

Date_____

Name _____

Designation_____

Name of the State Association

_____

Address_____

Seal_____

Note: This Certificate will be valid only when signed personally by the Secretary of the State Association.

(Annexure B of the Department of Personnel and Administrative Reforms O.M. No. 14015/1/78-Estt(D) dated 4th August, 1980)

ANNEXURE 'B'

FORM 3

(For representing a University in the Inter-University Competition in one of the recognized Games/sports).

UNIVERSITY OF _____

Certificate to a meritorious sportsman for employment to a Group C&D service under theCentral Government

Certified that Shri/Smt./Kumari_____
Son/Wife/Daughter of Shri_____
Resident of_____student of _____
Represented the University of_____in Inter the game/event of _____in Inter-University Competition/Tournament held at _____
from_____to_____.

The position obtained by the individual/team in the above said competition/tournament was_____.

The certificate is being given on the basis of records available in the office of Dean of Sports or Officer in overall charge of sports in the University of _____
.

Place_____

Date_____

Signature_____
Name _____

Designation_____

Name of the University:
_____
Address_____

Seal_____

Note: This Certificate will be valid only when signed personally by Dean/Director or other officer in overall charge of sports in the University of _____

(Annexure B of the Department of Personnel and Administrative Reforms O.M. No. 14015/1/78-Estt(D) dated 4th August, 1980)

ANNEXURE 'B'

FORM 4

DIRECTORATE OF PUBLIC INSTRUCTIONS/EDUCATION OF THE STATE OF ___

Certificate to a meritorious sportsman for employment to a Group C & D services under theCentral Government

Certified thatShri/Kumari_____ son/daughter of Shri_____resident of_____student of _____
(Complete address)
Represented the_____State School Team in the game/event of_____in the National Games for schools held at_____from_____to_____.

The position obtained by the individual/team in the above said Competition/Tournament was _____.

The certificate is being given on the basis of records available in the office of Directorate of Public Instructions/education of_____.

Place_____

Signature_____

Date_____

Name _____

Designation_____

Address_____

Seal_____

Note: This Certificate will be valid only when signed personally by the Director or Additional/Joint or Deputy Director in overall charge of sports/games/for Schools in the Directorate of Public Instruction/Education of the State.

(Annexure B of the Department of Personnel and Administrative Reforms O.M. No. 14015/1/78-Estt(D) dated 4th August, 1980

ANNEXURE 'B'

FORM 5

DIRECTORATE OF PUBLIC INSTRUCTIONS/EDUCATION OF THE STATE OF ___

Certificate to a meritorious sportsman for employment to a Group C service under the Central Government

Certified that Shri/Kumari_____ son/wife/daughter of Shri_____resident of _____student of _____
Represented the Univerisity/Institute/School of_____ _____in the game/event of _____ _____ in Khelo India University Games/Khelo India Youth Games/Khelo India Winter Games/Khelo India Para Games held at __ _____ from _____ to _____.

The position obtained by the individual/team in the above said Competition/Tournament was _____.

The certificate is being given on the basis of records available in the office.

Place_____

Signature_____

Date_____

Name _____

Designation_____

Address_____

Seal_____

Note: This Certificate will be valid only when signed personally by the officer designated/officer in charge from Sports Authority of India for Khelo India University/Khelo India Youth Games/Khelo India Winter Games/Khelo India Para Games.

FORMAT FOR SC/ ST CERTIFICATE

A candidate who claims to belong to one of the Scheduled Caste or the Scheduled Tribes should submit in support of his/ her claim an attested/certified copy of a 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 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 parents are dead, the officer signing the certificate should be of the district in which the candidate himself ordinarily resides otherwise than for the purpose of his own education. Wherever photograph is an integral part of the certificate, the Commission would accept only attested photocopies of such certificates and not any other attested or true copy.

(The format of the certificate to be produced by Scheduled Castes and Scheduled Tribes candidates applying for appointment to posts under 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/Tribes_____ which is recognized as a Scheduled Castes/Scheduled Tribes* 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 Lists(Modification) order, 1956, the Bombay Reorganization Act, 1960 & the Punjab Reorganization Act, 1966, the State of Himachal Pradesh Act 1970, the North-Eastern Area(Reorganization) Act, 1971 and the Scheduled Castes and Scheduled Tribes Order(Amendment) Act, 1976.

The Constitution (Jammu & Kashmir) Scheduled Castes Order, 1956_____
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 (Scheduled Tribes) (Uttar Pradesh) Order, 1967 @
The Constitution (Goa, Daman & Diu) Scheduled Castes Order, 1968@
The Constitution (Goa, Daman & 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 1991@

The Constitution (ST) orders (Second Amendment) Act, 1991@
The Constitution (ST) orders (Amendment) Ordinance 1996@
The Scheduled Caste and Scheduled Tribe Orders (Amendment) Act 2002@
The Constitution (Scheduled Caste) Orders(Amendment) Act 2002@
The Constitution(Scheduled Caste and Scheduled Tribe) Orders (Amendment) Act 2002@
The Constitution (Scheduled Caste) Order (Amendment) Act 2007@
%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 belong to the _____ Caste/Tribe which is recognized 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 _____ District/Division* _____of the State/Union Territory of _____

Signature_____

** Designation_____

(with seal of office)

Place_____

Date_____

* Please delete the words which are not applicable

@ Please quote specific presidential order

% Delete the paragraph which is 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 Caste/Tribe Certificates**:

(i) District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Dy.Collector/Ist Class Stipendiary Magistrate/Sub-Divisional Magistrate/Extra-Assistant Commissioner/Taluka Magistrate/Executive Magistrate.

(ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.

(iii) Revenue Officers not below the rank of Tehsildar.

(iv) Sub-Divisional Officers of the area where the candidate and/or his family normally resides.

NOTE: ST candidates belonging to Tamil Nadu State should submit caste certificate ONLY FROM THE REVENUE DIVISIONAL OFFICER.

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

This is to certify that Shri/Smt./Kumari _____son/daughter of _____ of village/town _____

in District/Division _____ in the State/Union Territory _____ belongs to the _____ Community which is recognized as a backward class under the Government of India, Ministry of Social Justice and Empowerment's Resolution No. _____ dated _____*. Shri/Smt./Kumari _____ and/or his/her family ordinarily reside(s) in the _____ District/Division of the _____ State/Union Territory. 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 8.9.1993**.

District Magistrate: _____

Deputy Commissioner etc.: _____

Dated:

Seal:

* The authority issuing the certificate may have to mention the details of Resolution of Government of India, in which the caste of the candidate is mentioned as OBC.

** As amended from time to time.

Note: The term "Ordinarily" used here will have the same meaning as in Section 20 of the Representation of the People Act,1950.

Annexure-E

Form-VI Certificate of Disability

(In cases of amputation or complete permanent paralysis of limbs or dwarfism and in case of blindness)
[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 a disability.

Certificate No. Date:

This is to certify that I have carefully examined Shri/Smt./Kum. _____son/wife/daughter of Shri _____Date of Birth (DD/MM/YY) _____age _____years, male/ female _____ registration No. _____permanent resident of House No. _____ Ward/Village/Street _____Post Office _____District _____State _____, whose photograph is affixed above, and am satisfied that:

(A) he/she is a case of:

- locomotor disability
- dwarfism
- blindness

(Please tick as applicable)

(B) the diagnosis in his/her case is _____

(C) he/she has _____% (in the figure) _____percent (in words) permanent locomotor disability/dwarfism/blindness in relation to his/her _____(part of body) as per guidelines (..... number and date of issue of the guidelines to be specified).

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

Nature of Document	Date of Issue	Details of authority issuing certificate

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

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

Annexure-E

Form - VII 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.

Certificate No. Date:

This is to certify that we have carefully examined Shri/Smt./Kum. _____son/wife/daughter of Shri _____Date of Birth (DD/MM/YY) _____ Age _____years, male/female _____.

Registration No. _____permanent resident of House No. _____ Ward/Village/Street _____Post Office _____District _____State _____, whose photograph is affixed above, and am satisfied that:

(A) he/she is a case of Multiple Disability. His/her extent of permanent physical impairment/disability has been evaluated as per guidelines (.....number and date of issue of the guidelines to be specified) for the disabilities ticked below, and is shown against the relevant disability in the table below:

S. No	Disability	Affected part of body	Diagnosis	Permanent physical impairment/mental 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. Speech and Language disability

12. Intellectual Disability

13. Specific Learning Disability

14. Autism Spectrum Disorder

15. Mental illness

16. Chronic Neurological Conditions

17. Multiple sclerosis

18. Parkinson's disease

19. Haemophilia

20. Thalassemia

21. Sickle Cell Disease

(B) In the light of the above, his/her overall permanent physical impairment as per guidelines (number and date of issue of the guidelines to be specified), is as follows:

In figures _____percent
In words: _____percent

2. This 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)

@ e.g., Left/right/both arms/legs
# e.g., Single eye
£ e.g., 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

5. Signature and seal of the Medical Authority.

Name and Seal of Member Name and Seal of Member Name and Seal of the Chairperson

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

Annexure-E

Form – VIII Certificate of Disability

(In cases other than those mentioned in Forms VI and VII)

(Name and Address of the Medical Authority issuing the Certificate) (See rule 18(1))

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

Certificate No. Date:

This is to certify that I have carefully examined

Shri/Smt./Kum. _____son/wife/daughter of Shri _____Date of Birth (DD/MM/YY)_____ _____Age _____years, male/female _____Registration No. _____permanent resident of House No. _____Ward/Village/Street _____Post Office _____District _____ State _____, whose photograph is affixed above, and am satisfied that he/she is a case of disability. His/her extent of percentage physical impairment/disability has been evaluated as per guidelines (number and date of issue of the guidelines to be specified) and is shown against the relevant disability in the table below:

S. No	Disability	Affected part of body	Diagnosis	Permanent physical impairment/mental 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 Learnin g Disability			
12.	Autism Spectrum 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 applicable)

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) _____

@ - e.g., Left/Right/both arms/legs # - e.g.,
Single eye/both eyes
€ - e.g., 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

(Authorized 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 issued

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.

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