GOVERNMENT OF MEGHALAYA APPLICATION FORM FOR SCHEDULED CASTE/TRIBE CERTIFICATE UNDER ADJUSTMENT MADE FOR ECORE (CSC atc.)

(PFC/CSC use only)
Application Details

UNDER eDISTRICT MMP FOR FC/PFC/CSC etc. (Please use CAPITAL letters to fill in the application form)

Photograph

^	Application Details
A.	Application Details 1SC Certificate SC ST ST
	2. Name of the Office to whom application is made:
В.	Applicant Details:
	1. Applicant's Name in Full: *(Shri/ Smti/Kumari)
	(First Name) (Middle Name) (Last Name)
	2. Alias (if any) :
	3. Gender *: Male Female Others
	4. Previous Name (if changed) :
	5. Maiden Name / Birth Name (if any):
	6. Date of Birth *: (dd/mm/yyyy)
	7. Age *: 8. Place of Birth :
	9. Caste/ Tribe *: 10. Nationality *:
	11. Religion *:
	12. Mobile No. *: 13. E-mail :
	14. EPIC No. :15. Aadhaar Number :
	16. Date of Entry to Meghalaya: (dd/mm/yyyy) (Fill 16 & 17 if applying for SC Certificate)
	17. Place resided before entry into Meghalaya:
	18. Whether staying in Rented House?* Yes No 18.b If Yes, Name of the House Owner*
	19. Present Occupation.* Student Govt. Servant Non. Govt. Servant Business Unemployed
_	(If Govt. Servant or non-Govt. Servant) Name of Organization Designation Place of Posting Place of Posting
C.	Permanent Address: 20. State *:
	22. Village/Town*: 23. Locality *:
	24. Sub-Locality: 25. Nearest Landmark:
	26. Post Office *: 27. Police Station/ Outpost *:
D.	Present Address: Same as address above Yes
	28. State *:
	32. Sub-Locality: 33. Nearest Landmark:
	34. Post Office* : 35. Police Station/Outpost *:
E.	Parents/Guardian Details:
	36. Father's Name in Full (Shri/Dr./Lt.)*:
	38. Father's Nationality*:
	39. The community of Father *(Tick): SC ST General 39.b. Caste/Tribe
	40. Father's Religion *:
	41. Mother's Name in Full (Smti/Dr./Lt.*:
	42. Mother's Nationality *:
	43. The community of Mother* (<i>Tick</i>): SC ST General 43.b. Caste/Tribe
	44. Mother's Religion *:

46	. Guardian's Name in Full (Shri/Smti/Mr/Mrs/Dr):			
4	7. Self/Father's /Mother's /Guardian's EPIC No.*:			
	gration Details: (If applicable)			
47	. Have you migrated from another state *: Yes No (Fill up below details 48-56 only if you have selected "Yes" in Sl no.47 above)			
48	Applicant filling for ST/SC Certificate based on whom: Father Mother			
49	. State/UT *: 50. District *:			
	. Village/Town *: 52. Locality *:			
	. Caste/Tribe *: 54. Certificate No. *:			
	Scheduled Tribe/Caste Issuing Authority *:			
	Date of Issuance of Certificate *: (dd/mm/yyyy)			
	tails of Adoptive Parents: Same Parent's Details as above : (If applicable)			
	. Whether Adopted *: Yes No			
	l up below details58-65 only if you have selected "Yes" in sl no 57 above)			
•	. Father's Name *:			
	. Mother's Name *:			
60	. State *: 61. District *:			
	. Village/Town *: 63. Locality *:			
64	. Caste/Tribe *: 65. Religion *:			
De	claration:			
Th	s is to certify that the information furnished as above are true to the best of my knowledge and belief and the applicant wo	ould be liab		
	prosecution if found otherwise.			
Da	Date:			
Pla	ce: Signature of the Applicar	nt		
1.	All columns marked with * are mandatory fields and must be filled in			
2.	Please refer the checklist for documents to be enclosed along with application form			
3.	In case, the applicant is minor, EPIC of father/mother should be submitted			
4.	The Recommending Officer should give due importance while certifying in the application form and be liable to any action deemed fit by the Government in case of false recommendation.	d they sha		
М	Mandatory Enclosures for Scheduled Caste/Scheduled Tribe Certificate:			
1.	Passport Size Colour photograph.			
2.	Birth Certificate/SSLC Admit Card			
3.	Any One of Residential Proof (Ration Card/ Land documents/EPIC/Electricity Bill/Telephone Bill)/Ar	ny		
_	Government Certificate			
4. -	ST/SC Certificates of Parents, in case applicant is minor			
5. 6.	If adopted, Adoption documents (Court order/Registered Adoption deed) In case of Migration, ST/SC Certificate from the migrating state			
7.	Father's /Mother's /Guardian's or Applicant's EPIC is Mandatory			
8.	Any other document			
No	e :- All enclosures should be self- attested			
	GOVERNMENT OF MEGHALAYA Acknowledgement Receipt For Scheduled Caste/Scheduled Tribe eDISTRICT MMP			
Nan	e of Applicant: Date of Submission:			
	000/000 7 1 1			
	TTC TOKETINO.			
CSC	PFC Location:			