## CERTIFICATE - 1

Certificate for Domicile of Rajasthan

(Any one relevant certificate out of the following six must be given)

Domicile Category - A	CAM- 2020
CERTIFICATE – (To be given if father/mother of the candidate is	
(10 be given in father/mother of the candidate is	a bonanue resident of Kajastnan)
It is certified that Shri/ Smt Shri/ Kumari is a (Name of the candidate)	
(Ivanie of the candidate)	
(To be given if the candidate is a bonafic	le resident of Rajasthan)
It is certified that Shri/ Kumari	Son/Daughter of
(Name of the candida	
Shri/Smt is a bo	nafide resident of Rajasthan.
Signature of the Distric	t Magistrate / Executive Magistrate
C C	ct Magistrate / S.D.M.
OR	
If the above certificate, issued by competent authority, is already	available then attach the attested photocopy of
that certificate.	
0.0	
OR	
Domicile Category - B	CAM- 2020
CERTIFICATE – 1 (ii	)
(To be given if the candidate has studied continuously for preceding 3 years up to and including the year of passing qualifying examination (i.e B.Tech/B.Arch/MCA/M.Sc./AMIE) as a regular student in recognized University)	
I certify that Shri/ Kumari	son/daughter of
(Name of the candidate)	Son/daughter of
Shri / Smt	
has studied continuously in College(s) in Rajasthan as a regular student during sessions to	
in classes to	
	ature of the Director/Principal of Institute
Date :	last attended with official seal
*If a candidate has studied in more than one University, then atta	ach this certificate in the above format for

each University.

Domicile Category - C	CAM 2020
CERTIFICATE	- 1 (iii)
(To be given if the candidate's father/mother is Government / Government of I	
Certified that Shri/ Smt	Father / Mother of
Shri/Kumari	is a serving employee
(Name of the candidate) (write designation) / retired employe ) of	e (write designation held at the time of retirement
(i) Government of Rajasthan including officer of All Ind	ia Service borne on the State Cadre of
Rajasthan (specify) or	
<ul> <li>(ii) The Undertaking/ Corporation / Improvement Trust/ I body duly constituted by the Government of Rajastha</li> </ul>	
(iii) Statutory body or Corporation formed under the India	n Companies Act incorporated in Rajasthan (Specify
Date :	Signature of the Employer/Head of Department with Designation and official seal
OR	
Domicile Category - C	CAM 2020
CERTIFICATE	
(To be given if the candidate's father/ mother is a serving employee of University or Govt. Aided Engineering College in Rajasthan )	
Certified that Shri/ Smt	Father / Mother of
Shri/Kumariof the candidate)	is a serving employee (write (Name
designation) of	in (Name of University)
Govt. Aided Engineering College	and has put in at least three years service on the
date of submission of CAM-2020 Form.	
s	ignature of the Employer/Head of the Department with
Date :	Designation and official seal

Domicile Category - C	CAM 2020
CERTIFICATE – 1 (v) (To be given if the candidate's father/mother is a Central Government / Public Sector Undertaking employee serving in the State of Rajasthan)	
Certified that Shri/ Smtis Shri/Kumariis (Name of the candidate)	
Institution of the Central Government including Public Sector Un regular rolls and he/she is serving at	<b>•</b> •
in the State of Rajasthan on the date of application as	(Write name of city)
Date :	Signature of the Employer/Head of Department with Designation and official seal

OR

Domicile Category - C	CAM 2020
CERTIFICATE – 1 (vi)	
(To be given if the candidate's father/mother is an employee of Rajasthan origin, serving in Central Govt. / Public Undertaking/ Defense / National Institutes of Govt. of India in States other than Rajasthan)	
I certify that Shri/ Kumari	is the (Name of
the candidate)	
natural son/ daughter of Shri/Smt father/mother is serving and has put in at least three years of Service on the last date of subm	ission of application form
in Indian Defense Service/ Central Government Service/Institution of the Central Government including Public Sector	
Undertaking as	
Write designation & name of organization)	
and he/she is an employee of Rajasthan origin irrespective of his/her place of posting. The State of origin and the home town as given by him/her at the time of his/her entry into service is	
Date : Signature of the Employment Signature of the Employment with Designation	loyer/Head of Department and official seal

Category I certificate: SC/ ST/ *	*Non-creamy layer OBC/ *Non-creamy layer SBC	CAM 2020
CERTIFICATE – 2 CERTIFICATE REGARDING SCHEDULED CASTE/SCHEDULED TRIBE/ *NON CREAMY LAYER OTHER BACKWARD CLASSES/ *NON CREAMY LAYER MOST BACKWARD CLASSES (MBC) (This certificate must be signed by District Magistrate/Executive Magistrate/Additional District Magistrate/Sub Divisional Magistrate/Tehsildar of the District /Place of which the candidate is a resident.)		
(Name of the District Magistrate/Executive I the natural born (not adopted) son/d	laughter of Shri led Tribe/ Non Creamy Layer Other Backward Classes / Non	and
by birth as notified under Presidenti	ial Order for the State of Rajasthan in	District
(Village / Tehsil)		
Court Seal	Signature of the District Magistrate / Executive Magistrate I Addl. District Magistrate / S.D.M. /Tehsildar	Date :
	OR	
If the above certificate, issued by co	ompetent authority, is already available then attach the attested photocopy	of that certificate.
authority and should not be older t	creamy layer MBC candidates, the above certificate should be is han one year. (b) Non creamy layer OBC/ non creamy layer MB llowing format along with the above certificate.	
UNDERTAKING BY NON	N CREAMY LAYER OBC/ NON CREAMY LAYER MBC CAN	NDIDATES
I,	son / daughter of Shri	
resident of village / town / city	district	Rajasthan State
hereby undertakes that I belong to the	e community which is recognised as a backward class by Gov	ernment of Rajasthan
for the purpose of reservation for a	admission in the state of Rajasthan. It is also declared that	t I do not belong to
persons / sections covered within	the meaning of "Creamy Layer" as defined in the notific	ations issued by the
Department of Personnel, Govern	nment of Rajasthan.	
year ending on March 31, 2020. That in the event of declaration bein I will not have any objection whats	a parents / guardian is below the prescribed limits for creamy ag found false misleading or incorrect during or after M.Tech./ soever against the action taken in the matter, which I underst and if the degree of programme has been awarded, the same	M.Arch. programme, and, shall not be less
Place :	Signature of the Candidate	
Date :	Name of the candidate	

Category II Certificate: EXS1/EXS2	CAM 2020	
CERTIFICATE – 3 CERTIFICATE FOR CHILDREN OF DEFENCE PERSONNEL KILLED OR SEVERELY DISABLED (TO BE SUBMITTED BY THE CHILDREN OF DEFENCE PERSONNEL * PARA-MILITARY FORCES** KILLED OR SEVERELY DISABLED*** IN ACTION DURING HOSTILITIES/WARS OR ON DUTY DURING PEACE TIME)		
(This certificate must be signed by the Commandant or OIC Record of Army, Navy & Air-Force, this certificate must be sign	Is to which the Soldier/JCO belongs. In case of officers ed by the Service HQ of respective branch)	
I,		
certify that		
Natural Father of		
(Name of applica		
EXS1 was killed in action OR		
	m service/Died while in service with death ee and boarded out with disability	
	bility and its percentage as per medical board)	
His particulars are:1.Service No., Rank & Name of the person		
2. Name of the Unit last served		
3. Date of enrolment Date of death/di	scharge/retirement	
4. Home town in Rajasthan as given by him at the time of h	-	
5. His Registration/Identity Card No. is	dated and	
P.P.O. No. is		
	Signature	
Date : Seal of Office Na	ime	
<ul> <li>* Defense personnel will mean Commissioned Officers, Junior Commisses their equivalent ranks in Navy and Air-Force of Rajasthan orige</li> <li>** Para Military forces consist of Border Security Force, Central Reserved Applicable to personnel of Rajasthan origin only.</li> <li>*** As per GOI Ministry of Home Affairs, Department of Personnel and dated 31-12-1979, severely disabled means with over 50 per attributable to military service.</li> </ul>	in only. e Police, Assam Rifles and Indo-Tibetan Border Police. I Administrative Reforms, Order No. 14024/6/77 Estt.(D),	
<b>OR</b> If the above certificate, issued by competent authority, is already that certificate.	v available then attach the attested photocopy of	

Category II Certificate: EXS	CAM 2020	
CERTIFICATE – 4 CERTIFICATE TO BE SUBMITTED BY CHILDREN OF EX-SERVICEMEN*		
I,	ertifying Officer)	
certify that	the Ex-Serviceman)	
1. Service No., Rank and Name of the Person		
2. Name of the Unit last served		
3. Date of enrolment	Date of retirement	
4. He/She is/was ex-serviceman of Rajasthan origin and his/her home town as given by him/her at the time of his/her entry into service is		
5. His/Her Registration/Identity Card No. is PPO No. is .	dated and	
	Signature	
	Name (District Soldier Welfare Officer)	
Date Seal of Office	Name of District	
<ul> <li>*(1) Definition of Ex-servicemen shall be as per Hand Book on Resettlement of Ex-servicemen (1995).</li> <li>(2) Ex-servicemen should be of Rajasthan origin. The State of origin and the home town as entered in discharge certificate shall only be accepted as proof in respect of above.</li> </ul>		
<b>OR</b> If the above certificate, issued by competent authority, is already available then attach the attested photocopy of that certificate		

**Category II Certificate: EXS** 

CAM 2020

CERTIFICATE TO BE SUBMITTED BY CHILDREN OF GALLANTRY AWARDWINNERS

Please attach attested photo copy of Gallantry award certificate issued by competent authority along with the certificate having particulars about the serviceman.

Category Certificate: PwD	<u>CAM 2020</u>
CERTIFICATE – 5	
CERTIFICATE REGARDING PERSON WITH DISABILITY (PwD)	
(To be given by authorized Medical Orthopedic Surgeon of the rank of Professor/Associate Professor/Head of the Department of a Government Medical College/Hospital or by District Medical Board)	
This is to certify that Shri / Kumari	
Son/Daughter of Shri	is a
Person with Disability in terms of the accepted norms. The percentage of handicap is	
nature of handicap/ disability is as follows:	
(Signature of the Candidate)	
Place :	Signature of Orthopedic Surgeon / Medical Board
Date:	(with Official Seal)
<b>OR</b> If the above certificate, issued by competent authority, is already available then attach the attested photocopy of that certificate	