

TEACHING EXPERIENCE CERTIFICATE

Certified that Mr./Miss/Mrs/_____ S/o/D/o
Shri _____ resident of
village/town _____ Tehsil _____ Distt.
_____ having qualification _____
has been working in _____ (Name of the School)
since _____ as a Nursery Teacher/ Primary Teacher/TGT/PGT
till _____.

He/She has _____ years _____ months of teaching experience.

During his/her service in this school, his/her work and conduct remained good.

**Signature of Head
of the School with Stamp**

Date: _____

Place: _____

Name _____

Designation _____

Address _____

IMPORTANT:- Certificate with incomplete entries will be rejected.

LIST OF THE SCHEDULED CASTES IN HARYANA STATE

Sr.No.	Name of The Caste	Sr.No.	Name of The Caste
1	Ad Dharmi	27	Perma
2	Balmiki, Churra, Bhangi	28	Pherera
3	Bangali	29	Sanhai
4	Brar, Burar, Berar	30	Sanhal
5	Bhatwal	31	Sansi, Bhedkut Manesh
6	Bauria, Bawaria	32	Sansai
7	Bazigar	33	Sapela, Sapera
8	Bhanjra	34	Sarera
9	Chanal	35	Sikligar, Bariya
10	Dagi	36	Sirikiband
11	Darain	37	Chamar
12	Daha, Dhaya, Dhea	38	Jatia Chamar
13	Dhanak	39	Rahgar
14	Dhogri, Dhangri, Siggri	40	Raigar
15	Dumna, Mahasha, Doom	41	Ramdasi
16	Gagra	42	Ravidasi
17	Gandiala, Gandhil, Gondaloo	43	Balahi
18	Kabirpanth, Julaha	44	Batai
19	Khatik	45	Bhatoi
20	Kori, Koli	46	Bhambi
21	Marija, Marecha	47	Chamar-Ravidas
22	Mazhabi, Mazhibi Sikh	48	Jatav
23	Megh	49	Jatava
24	Nat, Badi	50	Mochi
25	Od	51	Ramadasia
26	Pasi		

**LIST OF BACKWARD CLASSES IN HARYANA STATE
BLOCK-A**

Sr.No.	Name of The Caste	Sr.No.	Name of The Caste
1	Aheria, Aheir, Heri, Naik, Thori or Turi, Hari	37	Kuchband
2	Barra	38	Labana
3	Beta, Hensi or Hesi	39	Lakhera, Manihar, Kachera
4	Bargin	40	Lohar, Panchal
5	Barwar	41	Madri
6	Barari, Tambo	42	Mochi
7	Baragi, Bairagi, Swami, Sadh	43	Mirasi
8	Battora	44	Nar
9	Bharbhunja, Bharbuja	45	Noongar
10	Bhat, Bhatra, Dapri, Ramiya	46	Nalband
11	Bhuhalia Lohar	47	Pinja, Penja
12	Changar	48	Rehar, Rehara or Re
13	Chirimar	49	Raigar
14	Chang	50	Rai Sikh
15	Chimba, Chhipi, Chimpa, Darzi, Rohilla	51	Rechband
16	Diaya	52	Shorgir, Shergir
17	Dhobis	53	Soi
18	Dakaut	54	Singrkant, Singrwala
19	Dhimar, Mallah, Kashyap, Rajpoot, Kahar, Jhinwar, Dhinwar, Khewat, Mehra Nishad, Sakka, Bishti, Sheikh-Abbasi	55	Sunar, Zargar, Soni
20	Dhosali, Dosali	56	Thathera, Tamera
21	Faquir	57	Teli
22	Gwaria, Gauria or Gwar	58	Vanzara, Baniara
23	Ghirath	59	Weaver (Jullaha)
24	Chasi, Chasiara or Ghosi	60	Badi/Baddon
25	Gorkhas	61	Bhattu/Chlattu
26	Gawals, Gowala	62	Mina
27	Gadaria, Pal, Bagnel	63	Rahbari
28	Garhi Lohar	64	Charan
29	Harijan, Nai, Naie, Sain	65	Charaj (Maha Brahman)
30	Jhangra Brahman, Khati, Suthar, Dhiman, Tarkhan, Barnai, Baddi	66	Udasin
31	Joginath, Jogi, Nath, Jangum-Jogi, Yogi	67	Ramgarhia
32	Kanjar or Kanchan	68	Rangrez, Lilgar, Nilgar, Lallari
33	Kurmi	69	Dawala, Soni-Dawala, Nyaaria
34	Kumhars, Prajapati	70	Bhar, Raibhar
35	Kamboj	71	Nat (Muslim)
36	Kanghera		

At present Raigar, Mochi and Julaha castes find a mention in the list of the both scheduled castes and backward classes and it has been decided that persons belonging to these castes, who are not covered under the scheduled castes being Non-Hindus or Non-Sikh, can take the benefits under the backward classes only.

BLOCK-B

1. Ahir/Yadav 2. Gujjar 3. Lodh/Lodha 4. Saini, Shakya 5. Meo

SCHEDULED CASTE CERTIFICATE

Certified that Mr./Ms _____ son/daughter
of Shri _____ resident of
(complete address) _____

belongs to _____ caste, which has been
notified as Scheduled Caste by the Haryana Government.

This certificate is being issued to him/her on the basis of verification by Naib
Tehsildar/ Secretary, Municipal Committee _____.

No. _____
Date _____
Place _____

Sub-Divisional Officer (C)
(with legible seal)

BACKWARD CLASS CERTIFICATE (BLOCK 'A' OR 'B')

Certified that Mr./Ms _____ son/daughter
of Shri _____ resident of
(complete address) _____

belongs to _____ caste, which has been
notified as Backward Class by the Haryana Government and is placed in Block
_____ (mention Block 'A' or 'B')

**Further certified that he/she is not covered in Creamy Layer (Ref. letter No.
1170/SW(1)-95 dated 7.6.1995 and No. 22/22/2004-3GS-III dated 22.01.2009.**

This certificate is being issued to him/her on the basis of verification by Naib
Tehsildar/Secretary, Municipal Committee _____.

No. _____
Date _____
Place _____

Sub-Divisional Officer (C)
(with legible seal)

DECLARATION/AFFIDAVIT

(By the Parents of the Backward Class Category Candidates)

I _____ Father/Mother of _____
Resident of _____
seeking admission to _____ course in K.U.Kurukshetra do
hereby solemnly affirm & declare that I belong to _____ caste which
is included in the list of Backward Classes Block 'A'/'B' approved by the Haryana Govt.
I further declare and affirm that I and my wife/husband are not covered under the criteria
fixed by **Haryana Govt. vide letter No. 1170/SW(1)-95 dated 7-6-95 and No. 22/22/2004-
3GS III dated 22-1-2009** for excluding socially advanced persons/sections (Creamy Layer)
from Backward Classes.

I further undertake that in case the information contained in the above para is found
false at any stage, the Competent Authority will be entitled to cancel the admission.

DEPONENT

Dated: _____

Place: _____

VERIFICATION

Verified that the above statement is true and correct to the best of my knowledge
and belief and nothing has been concealed therein.

DEPONENT

The affidavit should be of the month of May, 2009 or later.

BLIND CANDIDATE CERTIFICATE

Certified that Mr./Ms _____ son/daughter
of Shri _____ resident of
(complete address) _____
_____ is blind.

No. _____
Date _____
Place _____

CHIEF MEDICAL OFFICER
(with legible seal)

**MEDICAL CERTIFICATE FOR PHYSICALLY HANDICAPPED
OFFICE OF THE CHIEF MEDICAL OFFICER, _____**

No. _____ Dated _____

Certified that Sh./Km./Smt. _____ son/daughter/wife
of Sh. _____ resident of
_____ District _____ appeared before the
Medical Board for medical check up. On his/her Medical Examination, it is found that the
nature of handicap/disability is _____% and (as applicable), is as under:

1. Blind or Low vision _____
2. Hearing impairment- _____
3. Loco motor disability/cerebral palsy _____

Thus the candidate is physically handicapped as per standard norms of Haryana.

(Signature of the Applicant)

Dated: _____
Place: _____

Chief Medical Officer
_____ Haryana
(Seal of the above authority)

* The handicap disability should not be less than 40% and should not interfere with the requirement of professional career such as Engineering/Architecture/Technician etc.

**CERTIFICATE TO BE FURNISHED
BY CHILDREN/GRAND CHILDREN OF
FREEDOM FIGHTER**

Certified that Mr./Ms. _____ son/daughter of
Shri. _____ resident of
(Complete address) _____
Freedom fighter of Haryana (Identity No. _____) is father/grandfather of
Mr./Ms. _____ of village/Town _____ Police
Station _____ Tehsil _____ District _____.

No.: _____
Dated: _____
Place: _____

Deputy Commissioner
of concerned
District of Haryana
(Office Stamp)

**CERTIFICATE OF THE EX-SERVICEMAN
OF INDIAN DEFENCE SERVICES/PARA-MILITARY FORCES**

Certified that Number _____ Rank _____
Name _____ son of Sh. _____
Father of _____ Resident of Village _____
Post Office _____ Tehsil _____ Distt. _____
belonging to the State of Haryana, as per his/her service record at the time of entry into
service, had served in the Army/Air Force/Navy/ _____ (Name of the Para-Military
Force) from _____ to _____ and subsequently discharged/retired from the
service on _____ as per his/her service record. At the time of entry into service the
home address given is _____
(Distt. _____) Haryana.

Place: _____
Date: _____

Signature
Officer Commanding/
Competent Authority
(with Official Seal)

AFFIDAVIT IN LIEU OF MIGRATION CERTIFICATE

(To be submitted on stamp paper of Rs. 5/- by the candidates who have passed their last examination from any other University/Board (other than Board of School Education Haryana)

AFFIDAVIT

I, _____ son/daughter of _____
resident of _____
do hereby solemnly affirm and declare as under:

1. That I am not appearing in any other examination from any other University/Board during the **session 2009-10** simultaneously with B.Ed. (2-Years) Examination of the Kurukshetra University except in the examination as mentioned at Sr. No. 5 of Important Instructions given in the Prospectus.
2. That I have not been debarred/disqualified/expelled by the previous University/Board from appearing in any University examination.
3. That no case of use of unfair means has been pending against me at the previous University/Board.
4. That in case my above statement is proved false, my candidature/result/degree in respect of the course which I have joined in the Directorate of Distance Education of the Kurukshetra University may be cancelled with no claim for refund of fees or restoration of candidature in the subsequent session and I shall bear all other consequences in this regard.

DEPONENT

VERIFICATION

I, the above named deponent do hereby verify that the contents of paras 1 to 4 above are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

DEPONENT

Date : _____
Place : _____

(To be attested by the Magistrate 1st Class)