

# Government of Andhra Pradesh

## FORM II

### **Form of Application for issue of Community, Nativity and Date of Birth Certificate relating to Scheduled CASTE/ BACKWARD CLASS under Section 3(1) of the Act 16 of 1993**

(Information to be furnished by the applicant himself supported by the documentary evidence)

To

The Mandal Revenue Officer,  
Shaikpet Mandal  
Hyderabad District

Sir,

I am in need of Scheduled Caste/Backward Class Community certificate for me / for my son/daughter for which the details are give below

1. Name of the applicant (in block letter)
2. Sex of the applicant
3. a) Father Name  
b) Mother Name
4. Present postal address
5. Place of permanent residence of the Certificate Seeker / is father / paternal Grand father as on the date of first Notification declaring the community as Scheduled Tribe, to which the certificate Seeker claims to belong
6. Age, date of birth and place of birth  
(If date is known approximate year of birth)
7. Place of ordinary residence (documents relating to house/land or other immovable property or Birth registration certificate or ration card or school records may be furnished)
8. If the applicant has been issued a community certificate in the past by any authority, a copy of such certificate should be furnished
9. Community for which certificate is claimed  
(Including sub-tribe or sub-group)
10. a) Community of the father  
(Including sub-tribe or sub-group)

b) Community of the Mother  
(Including sub-tribe or sub-group)

11. Whether the applicant is
- a) a natural born son or daughter of his/her parents
  - (OR)
  - b) adopted son/daughter of his/her parents

DECLARATION

I/We declare that the information furnished by me/us in the application is true and Correct, and the documents appended thereto are genuine and the contents of the documents are true and correct and that if these are found to be untrue and incorrect I/We shall be liable for prosecution for furnishing false and incorrect information / documents under section 10 of the Act No. 16 of 1993.

STATION

Signature of the Applicant

**DATED**

Signature of the Parent/Guardian