Final <u>Year Ap</u>	pearing Certificate	RMAT - 200-
		CERTIFICATE-1
CERTIFIC	CATE FOR CANDID	DATES APPEARING IN FINAL YEAR OF GRADUATION EXAMINATION
	(TO BE GIVEN BY	THE RESPECTIVE COLLEGE /INSTITUTION)
This is to certif	fy that Shri/Kumari	
Son/daughter o	of Shri/Smt	
student of		
is appearing in	final year of Degree	Examination
in the year 2008	8 (under 10+2+3 syste	em).
Place:		
Date: *Strike out whi	ichever is not applicab	ble. Signature of Principal With Official Seal
		(Tear from here)
		RMAT – 2008
	gory : A CERTIFICA	
Domicile Cate	gory : A CERTIFICA (any one relevan	<u>RMAT – 2008</u> CERTIFICATE – 2 ATE FOR DOMICILE OF RAJASTHAN
Domicile Cate	gory : A CERTIFICA (any one relevan e given if father/moth	RMAT – 2008 CERTIFICATE – 2 ATE FOR DOMICILE OF RAJASTHAN at certificate of the following six must be given) her of the candidate is a bonafide resident of Rajasthan
Domicile Cate To be It is certified	gory : A CERTIFICA (any one relevan e given if father/moth that Shri/ Smt	RMAT – 2008 CERTIFICATE – 2 ATE FOR DOMICILE OF RAJASTHAN nt certificate of the following six must be given) her of the candidate is a bonafide resident of Rajasthan CERTIFICATE – 2 (i)
Domicile Cate To be It is certified	gory : A CERTIFICA (any one relevan e given if father/moth that Shri/ Smt	RMAT - 2008 CERTIFICATE - 2 ATE FOR DOMICILE OF RAJASTHAN at certificate of the following six must be given) her of the candidate is a bonafide resident of Rajasthan CERTIFICATE - 2 (i)
Domicile Cate To be It is certified	gory : A CERTIFICA (any one relevan e given if father/moth that Shri/ Smt	RMAT – 2008 CERTIFICATE – 2 ATE FOR DOMICILE OF RAJASTHAN ht certificate of the following six must be given) her of the candidate is a bonafide resident of Rajasthan CERTIFICATE – 2 (i)
Domicile Cate To be It is certified Kumari	gory : A CERTIFICA (any one relevan e given if father/moth that Shri/ Smt To be given if the	RMAT – 2008 CERTIFICATE – 2 ATE FOR DOMICILE OF RAJASTHAN Int certificate of the following six must be given) her of the candidate is a bonafide resident of Rajasthan CERTIFICATE – 2 (i)
Domicile Cate To be It is certified Kumari	gory : A CERTIFICA (any one relevan e given if father/moth that Shri/ Smt To be given if the d that Shri/Kumari	RMAT – 2008 CERTIFICATE – 2 ATE FOR DOMICILE OF RAJASTHAN Int certificate of the following six must be given) her of the candidate is a bonafide resident of Rajasthan CERTIFICATE – 2 (i) Interval Interval Mathematicate of the following six must be given) her of the candidate is a bonafide resident of Rajasthan CERTIFICATE – 2 (i) Interval Mathematicate is a bonafide resident of Rajasthan OR e candidate is a bonafide resident of Rajasthan CERTIFICATE – 2 (i)
Domicile Cate To be It is certified Kumari	gory : A CERTIFICA (any one relevan e given if father/moth that Shri/ Smt To be given if the d that Shri/Kumari	CERTIFICATE – 2 ATE FOR DOMICILE OF RAJASTHAN att certificate of the following six must be given) her of the candidate is a bonafide resident of Rajasthan CERTIFICATE – 2 (i)
Domicile Cate To be It is certified Kumari It is certified Son/Daughter	gory : A CERTIFICA (any one relevan e given if father/moth that Shri/ Smt To be given if the d that Shri/Kumari	CERTIFICATE – 2 ATE FOR DOMICILE OF RAJASTHAN att certificate of the following six must be given) her of the candidate is a bonafide resident of Rajasthan CERTIFICATE – 2 (i)

RMAT - 2008 **Domicile Category : B CERTIFICATE – 2(ii)** (To be given if the candidate has studied continuously for preceding five years up to and including the year of passing qualifying examination as a regular student in recognized educational institutions of Rajasthan) son/ daughter of Shri/Smt has studied continuously in school / college in Rajasthan as a regular student during sessions Place: Signature of the Head Master/Principal of School/College last attended with official seal Date: *If a candidate has studied in more that one school/college, then attach this certificate in the above format for each school/college. (Tear from here)

OR

Domicile (Category : C
(To b	CERTIFICATE-2 (iii) be given if the candidate's father/mother is a serving/retired employee of Rajasthan Government/Government of Rajasthan Undertakings/ Autonomous bodies)
Certified	that Shri/SmtFather/Mother of Shri/
Kumari	
designation	n)/ retired employee (write designation held at the time of retirement
) of
(i)	Government of Rajasthan including officer of All India Service borne on the State Cadre of Rajasthan (specify) or
(ii)	The Undertaking/Corporation/Improvement Trust/Municipal Board/Panchayat Samiti/ Co-operative/Autonomous body duly constituted by the Government of Rajasthan (Specify) or
(iii)	Statutory body or Corporation formed under the Indian Companies Act incorporated in Rajasthan (Specify).
Place: Date:	Signature of the Employer/Head of Department With Designation and official seal

Domicile Category : C	RMAT – 2008
CE	RTIFICATE-2 (iv)
	/mother is a serving employee of University, Board of an or Govt. Engineering College in Rajasthan)
Certified that Shri/Smt	
Father/Mother of Shri/Kumari	(Name of the candidate) is a
serving employee (write designation) of Board of Secondary
Education Rajasthan or Govt. Engineering	g College Kota/ Bhilwara / Ajmer/ Bikaner /
and has put in at least three years service or	n the date of submission of RMAT-2008 Form.
Place:	Signature of the Employer/Head of Department
Date:	With Designation and official seal
	(Tear from here)
	OR

RMAT – 2008
CERTIFICATE-2 (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/Smt
Father/Mother of Shri/Kumari
is an employee of Central Government or Institution of the Central Government including Public
Sector Undertaking or Corporation and he/she is on the regular rolls and he/she serving at
(write name of city) in the State of Rajasthan on the date of application
as (Write designation).
Place:Signature of the Employer/Head of DepartmentDate:with Designation and official seal(Tear from here)

OR

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OR

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Domicile C	ategory : C	RMAT – 2008
		CERTIFICATE-2 (vi)
		's father/mother is an employee of Rajasthan origin, serving in dertaking /Defence/National Institutes of Govt. of India in States other than Rajasthan)
		(Name of the candidate) is the
natural son/	daughter of Shri/Smt	and his/her father/mother
is serving a	nd has put in at least	three years of Service on the last date of submission of application
form in Ind	lian Defence Service/	Central Government Service/Institution of the Central Government
including Pu	ublic Sector Undertaki	ng as
(Write designa	ation & name of organizati	ion) and he/she is an employee of Rajasthan origin irrespective of
his/her plac	e of posting. The Stat	te of origin and the home town as given by him/her at the time of
his/her entry	y into service is	
Place: Date:		Signature of the Employer/Head of Department with Designation and official seal
Note: Strik	e out the portion whi	ch is not applicable
		<u>ch is not applicable.</u> (Tear-from here)
Category I	Certificate: (SC/ST/C	DBC) RMAT – 2008
		CERTIFICATE – 3
CERT	IFICATE REGARDI	NG SCHEDULED CASTE/ SCHEDULED TRIBE/ OTHER BACKWARD CLASSES
		by District Magistrate/ Executive Magistrate/ Additional District istrate/Tehsildar of the District/Place of which the candidate is a resident.)
Ι		
		is the natural born (not adopted) son/daughter of
•		and belongs to Scheduled Caste/ Scheduled Tribe / Other
		(Name of the Caste) by birth in(Village / Tehsil)
		otified under Presidential Order for the State of Rajasthan
		since under residential order for the state of Rajastian
Place: Date:	Court Seal	Signature of the District Magistrate/Executive Magistrate Addl. District Magistrate/S.D.M./Tehsildar

CERTIFICATE FOR CHILDERN OF DEFENCE PERSON DISABLED (TO BE SUBMITTED BY THE CHILDEREN OF DEFE MILITARY FORCES** KILLED OR SEVERELY DISAB HOSTILITIES/WARS OR ON DUTY DURIN (This certificate must be signed by the Commandant or OIC I belongs. In case of officers of Army, Navy & Air Force, this Service HQ of respective brand [CNCE PERSONNEL* PARA- LED*** IN ACTION DURING IG PEACE TIME) Records to which the Soldier/JCO certificate must be signed by the ch) trifying Officer) Ex-Serviceman) or on active duty during peace time fence/ para-military services because entage as per medical based)
MILITARY FORCES** KILLED OR SEVERELY DISAB HOSTILITIES/WARS OR ON DUTY DURIN (This certificate must be signed by the Commandant or OIC I belongs. In case of officers of Army, Navy & Air Force, this Service HQ of respective brand (Service No., Rank & Name of the Cen certify that	LED*** IN ACTION DURING G PEACE TIME) Records to which the Soldier/JCO certificate must be signed by the ch) trifying Officer) Ex-Serviceman) or on active duty during peace time fence/ para-military services because entage as per medical based)
belongs. In case of officers of Army, Navy & Air Force, this Service HQ of respective brand I	certificate must be signed by the ch)
(Service No., Rank & Name of the Cercertify that	rtifying Officer) Ex-Serviceman) or on active duty during peace time fence/ para-military services because entage as per medical based)
(Service No., Rank & Name of the H Natural father of	Ex-Serviceman) or on active duty during peace time fence/ para-military services because entage as per medical based)
(Name of Applicant) EXS1 was killed, or (tick whichever is applicable) EXS2 was severely disabled during the hostilities/wars in Unit and has been discharged/retired from det of this disability. (Mention severe disability and its perc His particulars are: 1. Service No., Rank and Name of the Person	or on active duty during peace time fence/ para-military services because entage as per medical based)
EXS1 was killed, or (tick whichever is applicable) EXS2 was severely disabled during the hostilities/wars in Unit and has been discharged/retired from det of this disability. (Mention severe disability and its perc His particulars are: 1. Service No., Rank and Name of the Person. 2. Name of the unit last served. 3. Date of enrolment. (Mention severe disability and its perc	fence/ para-military services because entage as per medical based)
in Unit and has been discharged/retired from det of this disability. (Mention severe disability and its perc His particulars are: 1. Service No., Rank and Name of the Person 2. Name of the unit last served 3. Date of enrolment	fence/ para-military services because entage as per medical based)
(Mention severe disability and its perc His particulars are: 1. Service No., Rank and Name of the Person 2. Name of the unit last served 3. Date of enrolment Date of death/discharged /retin	entage as per medical based)
 Service No., Rank and Name of the Person Name of the unit last served	
3. Date of enrolment Date of death/discharged /retin	
4. Home town in Rajasthan as given by him at the til	rement
, C ,	me of his entry into service is
5. His Registration/Identity Card No. is	
	nture
* Defence personnel will mean Commissioned Officers. J ranks, non-combatant (enrolled) and their equivalent Rajasthan origin only.	
 ** Para Military forces consist of Border Security Force, C and Indo-Tibetan Border Police. Applicable to personnel of 	
*** As per GOI Ministry of Home Affairs, Department of Per Order No. 14024/6/77 Estt.(D), Dated 31-12-1979, sev percent disability and unfit for employment but disability	rsonnel and Administrative Reforms verely disabled means with over 50
If the above certificate, issued by competent authority, is already av copy of the certificate.	ailable, then attach the attested photo
copy of the certificate.	·

CERTIFICATE – 5

I							Y CHILDREN (. (Service No., Rank &	Name
of the Ce	rtifying Off	icer) certi	ify tha	ıt						
(Service	No.,	Rank	&	Name	of	the	Ex-Serviceman)	natural	father/mother	0
						• • • • • • • • •	(Name of	Applicant)	is/was ex-service	man
His/He	r particula	ars are:								
1. Serv	ice No., F	ank and	Name	e of the F	Person	•••••				
2. Nam	e of the u	nit last s	erved							
3. Date	of enrolr	nent			E	Date of	retirement			
4. He/S	he is/was	ex-servi	icema	n of Raja	isthan	origin	and his/her home	town as g	iven by	
him/	her at the	time of I	his/he	r entry ir	ito ser	vice is				
5. His/I	Her Regis	tration/I	dentity	y Card N	o. is		date	d		
and I	P.P.O. No	. is								
							G. (
							-			
							Name.			
Date			Soal	l of Offic			Namo		Soldier Welfare Officer)	
Date			Sea				Name	of District		••
*(1)	Definiti (1995).	on of E	x-serv	ricemen	shall t	be as p	er Hand Book o	n Resettle	ment of Ex-service	eme
(2)	Ex-serv						rigin. The State e accepted as pro-		and the home tow	n a
Note:	Attested	d copies	of dis	charge c	ertifica	ate and			mitted. Originals sh	noul
	bove certi the certifi		sued b	y compe	tent au	ıthority	r, is already avail	able, then	attach the attested j	phot
Catego	ry II Cei			3					RMAT –	200
-	-	_				-			AWARD WINN	
Please a the cert	ittach atte ificatē hāv	ested pho ving part	oto cop icūlars	oy of Gall 5 ābōūt tl	lantry 1ē sērv	Award iēēmēn	certificate issued	by compet	tent authority along	
									RMAT –	200
Catego	ry II Cei	tificate:	: PH							

CERTIFICATE REGARDING PHYSICALLY HANDICAPPED CANDIDATE

(To be given by authorized Medical Orthopaedic Surgeon of the rank of Professor/Associate Professor/Head of the Department of a Government Medical College/Hospital or by District Medical Board)

(Signature of the Candidate) Place: Date:

Signature of Orthopaedic Surgeon/Medical Board (with Official Seal)

If the above certificate, issued by competent authority, is already available, then attach the attested photo copy of the certificate.

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