Ref No: NITS/Academic/B. Tech. Admission Notice/2020/13076 Date: 10th Nov. 2020

NOTICE

DETAILS OF ADMISSION PROCESS FOR FIRST SEMESTER 2020-21 (B.TECH. PROGRAM)

- 1. Candidate has to submit the copies of following documents during ONLINE Institute Reporting and Admission at NIT Sikkim from 16th to 21st November 2020 as per the JoSAA 2020 schedule:
- i. JEE (Main) Score Card
- ii. JEE (Main) Admit Card
- iii. Birth certificate issued by competent authority/Class X (High School) Board Certificate as proof of date of birth
- iv. 10th Standard/matriculation Mark Sheet & Certificate
- v. Mark Sheet & Pass Certificate of qualifying examination (Class XII) or equivalent
- vi. School Leaving Certificate/Transfer certificate from the institute last attended.(Original at the time of physical reporting)
- vii. Migration Certificate(Original at the time of physical reporting)
- viii. Character/Conduct Certificate from the institution last attended.(Original at the time of physical reporting)
- ix. Gap certificate (applicable for candidate who have passed the qualifying exam in years prior to the current academic year)(Original at the time of physical reporting)
- x. Certificate of category (SC/ST/OBC-NCL), if applicable, as per Government of India format, available on the JoSAA-2020 website, issued by the competent authority. In case of OBC-NCL category, the certificate must be issued on or after April 01, 2020.
- xi. Certificate for Persons with Disabilities (PwD), if applicable, issued by the competent authority. Refer JoSAA-2020 website for format. (Original at the time of physical reporting).
- xii. Medical Certificate [as per JoSAA format] (Original at the time of physical reporting)
- xiii. Recent Passport size photographs not older than SIX month.(preferably in formal dress and light colour background)
- xiv. Provisional Seat Allotment letter
- xv. Photo ID proof issued by competent authority under Govt. of India
- xvi. Document Verification-cum-Seat Acceptance Letter.
- xvii. Online payment receipt for remaining Institute Fee and Hostel Fee.
- xviii. Family Annual Income Proof (Last three month Salary slip in case of parents are government employee

 OR ITR for assessment year 2020-2021 OR latest Income certificate in the name of parents or head of
 the family for others) along with affidavit declaration (In prescribed format)

Students are also requested to download the following formats given at the end of the notice (Page 5 onwards) and submit along with the above documents during **ONLINE Institute Reporting and Admission.**

The online link for admission is https://forms.gle/r5KtYEbCfNDrwjdc7. Students are advised to visit the Institute website (www.nitsikkim.ac.in) regularly for more updates:-

FORMAT I: Format for Study Gap Affidavit Declaration (Pg-05)

FORMAT II: Format for Income Affidavit Declaration (Pg-06)

FORMAT III: Declaration for the late submission of Relevant Documents (Pg-07)

FORMAT IV: Format for Medical Certificate [As per JoSAA format] (Pg-08)

FORMAT V: Format for SC/ST/PwD[As per JoSAA] (Pg-09-14)

FORMAT VI: Format for OBC-NCL [As per JoSAA format] (Pg-15)

FORMAT VII: Format for affidavit by the candidate (Pg-16)

<u>Note:</u> If the original certificates are not in English/Hindi, English/Hindi version/translation of such certificates, duly certified by the Principal/Director of the graduating Institute, will be required during the verification of documents.

The certificates listed at <u>S.No.</u> vi, vii and viii if not available at the time of online reporting and admission at the Institute, then they have to produce/send the same <u>on or before 15th January, 2021.</u>

2. Fees to be paid at the time of ONLINE REPORTING AND ADMISSION at the NIT Sikkim:

a. Total amount of Institute fee and hostel fee for 1st semester 2020-21 is Rs.73000/- (Rupees Seventy Three Thousand only) and Rs.16,750/- (Rupees Sixteen Thousand Seven Fifty only) respectively. However, the tuition fee exemption /waiver is available for SC, ST & PwD/ Economically Backward Students (For more fee details please refer Sl. No. 5 & 6).

The remaining amount, after payment to JoSAA 2020 shall be payable to the Institute at the time of online reporting and admission.

3. Regarding hostel accommodation:

- (a) All the students will be provided hostel accommodation. Only local students may be permitted to study as Day Scholar subject to application by parent and allowed by competent authority of NIT Sikkim.
- (b) Accommodation will be provided on sharing basis depending on the size of the rooms.

4. Regarding Mess Facility:

Boys & Girls Mess: The boys & Girls mess is run by a mess contractor authorised by the Institute. Boys must have to avail the food at the Institute run mess. The mess fees per is Rs. 18,000/- (Rupees Eighteen thousand only).

Note: The detail guidelines for hostel accommodation and mess facility will be separately issued once the Institute gets open for the physical reporting and offline classes.

5. Fee structure A: Institute Fee Structure

Fee Category	1 st SEM	2 nd SEM	3 rd SEM	4 th SEM	5 th SEM	6 th SEM	7 th SEM	8 th SEM
TUTION FEE 1. Tuition fee for SC/ST/PwD¹	Exempted	Exempted	Exempted	Exempted	Exempted	Exempted	Exempted	Exempted
2. Full tuition fee waiver category most economically backward ² (Having family annual Income less than 1 Lakh)	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
3.2/3′dTuition fee waiver category of economically backward Gen/OBC- NCL/Others³ (Having family annual	20834.00	20834.00	20834.00	20834.00	20834.00	20834.00	20834.00	20834.00
4.Tuition fee for Gen/OBC-NCL/Others (Students not included in above three category)	62500.00	62500.00	62500.00	62500.00	62500.00	62500.00	62500.00	62500.00
Caution deposit (One Time Refundable on	3000.00	00.00	00.00	00.00	00.00	00.00	00.00	00.00
condition) Examination Fee	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00
Admission Fee (One Time non-refundable)	500.00	00.00	00.00	00.00	00.00	00.00	00.00	00.00
Library Fee	800.00	800.00	800.00	800.00	800.00	800.00	800.00	800.00
Development Fee	750.00	750.00	750.00	750.00	750.00	750.00	750.00	750.00
Student Activities (Sports & Games, and Extra-curricular activities)	800.00	800.00	800.00	800.00	800.00	800.00	800.00	800.00
Student Medical	800.00	800.00	800.00	800.00	800.00	800.00	800.00	800.00
I Card (One time non-refundable)	100.00	00.00	00.00	00.00	00.00	00.00	00.00	00.00
Registration Fee	150.00	150.00	150.00	150.00	150.00	150.00	150.00	150.00
Alumni Association (One time non-refundable)	1000.00	00.00	00.00	00.00	00.00	00.00	00.00	00.00
Convocation Fee (One time non-refundable)	1000.00	00.00	00.00	00.00	00.00	00.00	00.00	00.00
Misc. fee	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00
Training & Placement Fee	1000.00	00.00	00.00	00.00	00.00	00.00	00.00	00.00
Total Institute Fee (for all other category) (Subjected to condition,4)	73000.00	<mark>66400.00</mark>	<mark>66400.00</mark>	66400.00	<mark>66400.00</mark>	<mark>66400.00</mark>	66400.00	66400.00
Total Institute Fee (for 2/3 rd fee remission category)(Subjected to condition ⁻³)	31334.00	24734.00	24734.00	24734.00	24734.00	24734.00	24734.00	24734.00
Total Institute Fee (for SC/ST/PwD & Full fee waiver category(Subjected to condition ^{1,2})	10500.00	3900.00	3900.00	3900.00	3900.00	3900.00	3900.00	3900.00

- 1. Tuition fee is fully exempted for S/ST & PwD students as per MHRD order no: 33-4/2014-TS.III, Dated: 24.06.2016
- 2. The most economically backward students (whose family income is less than Rs.1.00 lakh per annum) shall get full remission of the tuition fee as per MHRD order no: 33-4/2014-TS.III, Dated: 24.06.2016
- 3. The other economically backward students (whose family income is between Rs.1.00 to Rs.5.00 lakh per annum) shall get remission of 2/3rd of the tuition fee.
- 4. The Gen/OBC-NCL/Others category of students who do not include in above criteria, have to pay the full fee.

B: Hostel fee structure for B.Tech. Programme (Not applicable for Day scholars)

Fee Category	1 st SEM	2 nd SEM	3 rd SEM	4 th SEM	5 th SEM	6 th SEM	7 th SEM	8 th SEM
Mess Caution Deposit (One time & refundable on condition)	5000.00	00.00	00.00	00.00	00.00	00.00	00.00	00.00
Hostel Caution Deposit (One time & refundable on condition)	3000.00	00.00	00.00	00.00	00.00	00.00	00.00	00.00
Hostel Admission (One time non- refundable)	500.00	00.00	00.00	00.00	00.00	00.00	00.00	00.00
Hostel fee (Hostel Rent, Electricity charges and cleaning)	7500.00	7500.00	7500.00	7500.00	7500.00	7500.00	7500.00	7500.00
Mess Maintenance charge	750.00	750.00	750.00	750.00	750.00	750.00	750.00	750.00
Total amount of Hostel Fee (Rs.)	16750.00	8250.00	8250.00	8250.00	8250.00	8250.00	8250.00	8250.00

6. Bank Account Details for Remaining Fee Payment:

Types of Fee	Total Institute and hostel fee (1st sem)	Fee already paid to JoSAA 2020 including Rs 2000/- as processing charges	Balance amount to be paid at NIT Sikkim (Institute Fee & Hostel fee) during online reporting and admission	Mode of payment & account details
Institute & Hostel Fee SC/ST/PwD	27,250/-	35000/-	Nil* (the balance amount will be adjusted in next semester)	Online Transfer: Name: NIT Sikkim Account type: Current a/c Account No: 35907648590 IFSC: SBIN0007218 Bank: State Bank of India.
OBC-NCL/Gen (whose Annual Income is <1 Lakh per year as per the Income certificate and Affidavit declaration	27,250/-	75000/-	Nil* (the balance amount will be adjusted in next semester)	Branch: Ravangla (Online transfer/ NEFT/RTGS
OBC-NCL/Gen (whose Annual Income is between 1 Lakh to 5 lakh per year as per the Income certificate and Affidavit declaration	48,084/-	75000/-	Nil* (the balance amount will be adjusted in next semester)	etc. are only accepted)
OBC-NCL/Gen (whose Annual Income is > 5 Lakh per year as per the Income certificate and Affidavit declaration	89,750/-	75000/-	16,750/-	

Note: *For claiming the tuition fee remission at the time of online reporting and admission, the candidate must produce, Annual income proof (Last three month Salary certificate for govt employee parents <u>OR</u> ITR of current assessment year 2020-21 <u>OR</u> Income certificate in the name of parents issued by the competent authority on or after 1st April 2020) and affidavit declaration in the format under notary seal and signature.

If, unable to produce the above documents at the time of online reporting and admission, students has to deposit full fee. Such students may claim the tuition fee remission later (on or before 15th March 2021) by submitting the complete documents as stated above.

7. The tentative date of commencement of first semester classes (online/offline) shall be from 1st DECEMBER 2020.

For any kind of queries related to admission, you may contact:

b.techadmission2020@nitsikkim.ac.in

Contact No: 9734122366

With the permission of the competent authority, issued by:

Sd/-

Dean Academic

DEPONENT

FORMAT I: Format for Study Gap Affidavit Declaration

Mr	
	, do hereby solemnly and state as under:
1.	That her/ his above name and address is correct.
2.	That her/ his name is And his/her correct date of birth is
3.	That s/he has passed 12 th class from Board in the year In PCM Science
	stream.
4.	That there is a gap of $\underline{1}$ or $\underline{2}$ year between passing of 12^{th} class and now seeking admission in the
	NATIONAL INSTITUTE OF TECHNOLOGY SIKKIM.
5.	That during this gap period, s/he was doing
6.	That during this gap period, s/he was neither studying anywhere nor passed any other examination.
7.	That s/he was not involved in any criminal offence whatsoever and not punished for any offence by
	any Court of law during this gap period.
VEDE	ICATION:
That the from.	ne above statement is true to the best of my Knowledge and belief and nothing has been concealed there

Note: This is sample gap affidavit format. The applicant has to produce documents to proof above requirement to the Notary Public and get signed from him. This gap affidavit is to be printed on the legal non-judicial stamp paper of Rs. 20 or above.

FORMAT II: Format for Income Affidavit Declaration

(To be printed on the stamp paper (Non-Judicial) of Rs. 20 & above with sign and seal of notary)

AFFIDAVIT

Dr/Mr/MrsVilla				•	name)	R/O
	/Tehsil					
					certify tha	t my Annual
Incom						-
(Rupe	es:					
	attested Copy Enclosed).	e record of Inco	me Certificate iss	ued by the authority of	n dated:	
Furthe	er, the gross salary of any of	my family mem	ber(s) is as per the	salary slip of last three	month (copy en	closed).
held Son/D Nation or as Certific schola	responsible if in any paughter	case, it bre(Nan Sikkim from 202 n fine if any, submitted herein om agency /gove	aches the rules me of Student) who to 21 session onwa in case of viol during the interna-	s for the purpose no will undergo Four ards. The Institute may ation, or found false al verification by the I	of fee wai year B Tech I withdraw her/hi statement in nstitute. I will i	ver of my Programme at is candidature my Income
Slno	Name & Age		lation with	Occupation, if any	Derived income	annual
Jointly Signa	y declared this affidavit on the	nis date:			Signatur	re
Name	of Father/Mother/Parents:			Name of Student:		
				Dept:		
Mobil	e No:			Mobile no:		

Note: *The above matter must be printed/typed/written in the non-Judicial stamp paper of Rs. 20 and above. *The Name of Father/Mother/Parent should be same as declared in the admission form. *The bank account holder and Income certificate holder should be same person. *The affidavit along with annual family income proof has to be submitted in every odd semester registration with copy of afresh Annual Income Certificate/salary slip.*The Government servant may submit salary slip of last three month and other should submit annual income certificate issued by the competent authority only.

FORMAT III: Declaration for the late submission of Relevant Documents

Candidate's Details						
JEE application No.	Father Name:					
Date of Birth:	Mother Name :					
Candidate Name :	Guardian Name :					

Allotment Details	
Institute Name:	Department:
Seat Pool:	Candidate Category:
Allotted Category:	Allotted Quota:
CRL Rank:	Category Rank (if
	any):

The following document(s) is/are not currently available with me. I undertake that I will submit these documents at the allotted Institute by <u>15th January 2021</u>, failing which I shall forego the seat allotted to me.

Sl.No	Documents	Remarks
1		
2		
3		
4		
5		
6		

7	D	
	l lota	٠
	raic	

Signature of Parent/ Guardian

Signature of the Candidate:

FORMAT IV: Format for Medical Certificate

ANNEXURE - I: MEDICAL CERTIFICATE

MEDICAL CERTIFICATE (to be issued by a Registered Medical Practitioner)

GENERAL EXPECTATIONS

Candidates should have good general physique. In particular,

- 1. Chest measurement should not be less than 70 cm, with satisfactory limits of expansion and contraction.
- 2. Vision should be normal. In case of defective vision, it should be corrected to 6/9 in both eyes or 6/6 in the better eye. Colour blind and uniocular (having vision in only one eye) persons are restricted from admission to certain courses.
- 3. Hearing should be normal. Defective hearing should be corrected.

4.		art and lungs should not have any abnormality and there should be no history of mental illness depileptic fits.						
	1.	Name of the candi	date:	V.	1	7.7.		
	2.	Identification Mar	k (a mole	e, scar o	r birthmark), if any	100	
	3.	Major illness/operation, if any (specify nature of illness/operation)						
	4.	Height in cm: Weight in kg: Blood Group:						
	5.	Past History (a) Mental illness (b) Epileptic Fit						
	6.	Chest (a) Inspirat	ion in cn	1		(b) Expiration	in cm	
	7.	Hearing					37/19/	
	8.	Vision with or without glasses:	Right E	Eye	Left Eye	Colour Blindness	Uniocular vision (having vision in only one eye)	
	9.	Respiratory System						
	10.	Nervous System					1	
	11.	Heart (a) S	Sounds		(b) Murmur		
	12.	2. Abdomen Hernia Hydrocele (a) Liver (b) Spleen					Hydrocele	
	13.	Any other defects:	т			11		
		Certificate of Medical Fitness The candidate fulfils the prescribed standard physical fitness, medical fitness and is FIT for admission to Engineering/Architecture/ Pharmaceutics/ Science Course The candidate does not fulfil the prescribed standard of physical fitness/medical fitness and is unfit/temporarily unfit for admission due to following defects: Name of the Doctor Signature Registration number Seal						

FORMAT V: Format for SC/ST/PwD

ANNEXURE – III: Form of Certificate To Be Produced By Scheduled Castes And Scheduled Tribes Candidates (FORM SC/ST)

1.	This is to certify that Shri/ Shrimati/Kumari*	son/daughter* of
	of Village/Town*	District/Division*
		belongs to the
	Scheduled Caste / Scheduled Tribe* under: -	
	* The Constitution (Scheduled Castes) Order, 1950	
	* The Constitution (Scheduled Tribes) Order, 1950	
	* The Constitution (Scheduled Castes) (Union Territories) Order, 1951	
	* The Constitution (Scheduled Tribes) (Union Territories) Order, 1951	
	[As amended by the Scheduled Castes and Scheduled Tribes Lists (Modification Order	er) 1956, the Rombay Reorganisation Act
	1960, the Punjab Reorganisation Act, 1966, the State of Himachal Pradesh (Reorganisation) Act, 1971, the Scheduled Castes and Scheduled Tribes Orders (Au	Act, 1970, the North Eastern Areas
	Castes and Scheduled Tribes Orders (Amendment) Act, 2002]	
	* The Constitution (Jammu and Kashmir) Scheduled Castes Order, 1956;	
	* The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959, a	s amended by the Scheduled Castes and
	Scheduled Tribes Order (Amendment) Act, 1976;	
	* The Constitution (Dadara and Nagar Haveli) Scheduled Castes Order, 1962;	the following the second
	* The Constitution (Dadara and Nagar Haveli) Scheduled Tribes Order, 1962;	
	* The Constitution (Pondicherry) Scheduled Castes Order, 1964;	
	* The Constitution (Uttar Pradesh) Scheduled Tribes Order, 1967;	
	* The Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968;	
	* The Constitution (Goa, Daman and Diu) Scheduled Tribes Order, 1968;	
	* The Constitution (Nagaland) Scheduled Tribes Order, 1970;	
	* The Constitution (Sikkim) Scheduled Castes Order, 1978;	1 Page 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	* The Constitution (Sikkim) Scheduled Tribes Order, 1978;	
	* The Constitution (Jammu and Kashmir) Scheduled Tribes Order, 1989;	The second second
	* The Constitution (Scheduled Castes) Order (Amendment) Act, 1990;	
	* The Constitution (Scheduled Tribes) Order (Amendment) Act, 1991;	
	* The Constitution (Scheduled Tribes) Order (Second Amendment) Act, 1991;	-0.25
	The constitution (scheduled Tribes) of der (second Amendment) Act, 1971,	W. A. S. C.
2.	#This certificate is issued on the basis of the Scheduled Castes / Scheduled	ed Tribes* Certificate issued to Shri
	/Shrimati* father/mother* of Shri /Shrimati /K	
	Village/Town* in District/Division*	
	State/Union Territory* who belong to the Caste	/ Tribe* which is recognized as a
	Scheduled Caste / Scheduled Tribe* in the State / Union Territory	* issued by the
	dated	
3.	Shri/ Shrimati/ Kumari * and / or* his / he	r* family ordinarily reside(s)** in
٥.	Village/Town* of District/Division*	
	village/ Town of	of the state official refritory of
	70 100	Signature:
		Designation
		(with seal of the Office)
Dla	ice: State/Union Territory*	(with sear of the office)
Dai	te:	
* Pl	lease delete the word(s) which are not applicable.	
# A	pplicable in the case of SC/ST Persons who have migrated from another State/UT.	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The second secon
IME	PORTANT NOTES	
The	e term "ordinarily reside(s)**" used here will have the same meaning as in Section 20 of t	he Representation of the People Act,
	50. Officers competent to issue Caste/Tribe certificates:	
1.	District Magistrate / Additional District Magistrate / Collector / Deputy Commission	ner / Additional Deputy Commissioner /
	Deputy Collector / Ist Class	, I simmosomer /
	Stipendiary Magistrate / City Magistrate / Sub-Divisional Magistrate / Taluka Magistrat	e / Executive Magistrate / Extra Assistant
	Commissioner.	
2.	Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Ma	gistrate.
3.	Revenue Officers not below the rank of Tehsildar.	1.63
4.	Sub-divisional Officer of the area where the candidate and/ or his family normally resi	
5. 6.	Administrator / Secretary to Administrator / Development Officer (Lakshdweep Island Certificate issued by any other authority will be rejected.	۸J.

ANNEXURE –VI: Form of Medical Certificate for Persons with Disabilities (PwD)

Form-II

Disability Certificate

(In cases of amputation or complete permanent paralysis of limbs and in cases of blindness) (NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

(See rule 4)

Recent PP size
Attested
Photograph
(Showing face
only) of the person
with disability



Certificate No	Date:
This is to certify that I have carefully examined Shr	i/Smt./Km
Son/wife/daughter of Shri	Date of Birth (DD/MM/YY)
AgeYears, male/femaleRegist	ration No Permanent resident
of House No	Post
Office <u>D</u> istrict	State
whose photograph is affixed above, and am satisfie	d that:
1. he/she is a case of:a. Locomotor disabilityb. Blindness (Please tick as applicable)	
3. He/She has% (in figure)	ment/blindness in relation to his/herd).
4. The applicant has submitted the following docu	

Nature of Document	Date of Issue	Details of authority issuing certificate

Signature / Thumb impression of the person in whose favour disability certificate is issued (Signature and Seal of Authorized Signatory of notified Medical Authority)

Form-III Disability Certificate (In cases of multiple disabilities)

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

(See rule 4)

Recent PP size
Attested Photograph
(Showing face only)
of the person with
disability

CertificateNo	45.79	Date:	
9.			
This is to certify that I h	nave carefully examined S	hri/Smt./Kum	
S	on/wife/daughter of Shri		
Date of Birth		(DD/MM/YY) Age <u>Y</u> ears	ij,
male/female	.Registration No	permanent resident of	f
House No	Ward/Village/Street	Post	t
Office	District	State	
,	whose photograph is a	ffixed above, and are satisfied that	:

1. He/she is a Case of **Multiple Disability.** His/her extent of permanent physical impairment/ disability has been evaluated as per guidelines (to be specified) for the disabilities ticked below, and shown against the relevant disability in the table below:

S. No.		Affected Part of Body	Diagnosis	Permanent physical impairment/mental disability (in %)
1	Locomotor disability	@	7	
2	Low vision	#	00	
3	Blindness	Both Eyes		7-10A
4	Hearing impairment	£	3 11 11 1	
5	Mental retardation	X		E1-30-
6	Mental-illness	X		THE LIFE

@ - e.g. Left/Right/both arms/legs

- e.g. Single eye/both eyes

£ - e.g. Left/Right/bot hears

F 4-12

2.	In the light of the above, his/her overall permanent physical impairment as per						
	guidelines (to be specified), is as follows:						
		In figures:percent					
	In words:percent						
3.	The above condition is progressive/non-progressive/likely to improve/not likely to						
	improve.						
4.	Reassessment of disability's:						
	(i) Not necessary		1654 N				
	Or						
	(ii) is recommended/after_	yearsmonth	s, and therefore this certificate				
	shall be valid till(DD/M	IM/YY)	On Call F				
5.	The applicant has submitt	ed the following document	as proof of residence:				
	25	- C	40 135				
	Nature of Document	Date of Issue	Details of authority issuing certificate				
		1000					
			239275				
6.	Signature and seal of the I	Medical Authority:	5				
	PULL A						
	11000		All Indiana				
	1000	MANAGED OF	Section Section				
	Name and Seal of Member	Name of Seal of Member	Name and Seal of the Chairperson				
	Signature / Thumb impression of the person in whose favour disability certificate is issued		LIST				
	100						
			211 30				

Form-IV Disability Certificate

(In cases other than those mentioned in Forms II and III)

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

(See rule 4)

Recent PP size
Attested Photograph
(Showing face only)
of the person with
disability

Certificate NoDate:							
	3-D (-E) [
This is to certify that I	have carefully examined						
Shri/Smt./Km	son/wife/daughter						
of ShriDate of Birth (DD/MM/YY)							
AgeYears, male/femaleRegistration No							
permanent resident of House No	Ward/Village						
/StreetPost Office Di	istrictState						
whose photograph is affixed above, and am sa	atisfied that he/she is a case of						
disability.							

1. His/her extent of percentage of physical impairment/disability has been evaluated as per guidelines (to be specified) and is shown against the relevant disability in the table below:

S. No.	Disability	Affected Part of Body	Diagnosis	Permanent physical impairment/ment al disability (in %)
1	Locomotor disability	@		
2	Low vision	#		
3	Blindness	Both Eyes	- 11	
4	Hearing impairment	£		
5	Mental retardation	X		200
6	Mental-illness	X		

(Please strike out the disabilities which are not applicable.)

@ - e.g. Left/Right/both arms/legs

- e.g. Single eye/both eyes

£ - e.g. Left/Right/both ears

- ${\bf 2.} \quad The above condition is progressive/non-progressive/likely to improve.$
- 3. Reassessment of disability's:
 - a. not necessary Or
 - b. is recommended/after.....years.....months, and therefore this certificate shall be valid till (DD/MM/YY).....
- 4. The applicant has submitted the following document as proof of residence:

Nature of Document	Date of Issue	Details of authority issuing certificate
1.6%	WILLIAM	F 1 W 1 D
18		SHIP Lab III.
1.00	- W / S	R. D. Darwer

(Authorised Signatory of notified Medical Authority) (Name and Seal)

Countersigned

{Countersignature and seal of the CMO/Medical Superintendent/Head of Government Hospital, in case the certificate is issued by a medical authority who is not a government servant (with seal)}

Signature / Thumb impression of the person in whose favour disability certificate is issued

Note: In case this certificate is issued by a medical authority who is not a government servant, it shall be valid only if counter signed by the Chief Medical Officer of the District. Note: The principal rules were published in the Gazette of India vide notification number S.O.908(E), dated the 31st December, 1996.

FORMAT VI: Format for OBC-NCL [As per JoSAA format] Pg-15 ANNEXURE –IV: OBC-NCL Certificate Format

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES (NCL) APPLYING FOR ADMISSION TO CENTRAL EDUCATIONAL INSTITUTIONS (CEIS), UNDER THE GOVERNMENT OF INDIA

(This certificate must have been issued on or after 1st April 2020)

This is to cer Son/Daughter* of	rtify that Shri/Smt./Kn of Shri/Smt.*	a*
	of Village/Town*	District/Division*
		in the State/Union Territory
	belongs	to the
community which Ministry of No		kward class under Government of India**, and Empowerment's Resolution dated***.
Shri/Smt./Km.		and / or his/her family
ordinarily resid		District/Division of the
ordinarily resid	• ,	rritory. This is also to certify that he/she does
		ified vide OM No. 36033/3/2004-Estt. (Res.) I vide OM No.36036/2/2013-Estt(Res) dtd.
		District Magistrate /
		Deputy Commissioner /
	700	Competent Authority
Dated:		
Seal		
	e the word(s) which are not a	
	the Annexure (for FORM-OBC-	
		ls to mention the details of Resolution of of the candidate is mentioned as OBC.
NOTE:	of mula, in which the caste o	The candidate is mentioned as obci
(a) The term 'Ordinarily	resides' used here will have the same	meaning as in Section 20 of the Representation of the People Act,
(i) District Magistr. Collector / Ist Cl Assistant Comm (ii) Chief Presidency	ass Stipendiary Magistrate / Sub-Divisi issioner (not below the rank of Ist Class	Deputy Commissioner / Additional Deputy Commissioner / Deputy ional magistrate / Taluka Magistrate / Executive Magistrate / Extras Stipendiary Magistrate). ncy Magistrate / Presidency Magistrate.

FORMAT-VII: AFFIDAVIT BY THE CANDIDATE

(To be printed and signed in the non judicial stamp paper of Rs.100)

I,			1	8		J I	1 1 3	,	(full
name	of	student	with	JEE	(Main)	Application , having been	No.)	S/D/o	Mr./ Ms.
Techno	ology S	ikkim is her	eby abide	by unde	ertaking on	this affidavit:	adminued	to Nationa.	i ilistitute oi
temper	ament ion ma	or furnishin	g of wro	ng infor	mation wh	et in my applicat nich might be de t paid by me tow	etected at	any stage e	ven after my
recogniclass to require	ized by ests / s ed to d	the Institute eminars / q	e authorit uizzes, m ne concer	y during nid seme med tea	my stay a ester examinates or in	lies, games and t the institute and inations and end astitute authorities to time.	d shall ap d semeste	pear in all O r examinatio	online classes/ ons whenever
rusticat to stage	ted or e e Dharr	expelled from a and Strike	n the inst e in the in	itute, if stitute fo	I directly of any reason	red from the Roll or indirectly take ons whatsoever, e of institute's di	part in a or which	ny movemer	nt or agitation
School Police/ is prov	/Colleg Districted false	ge career so t authorities e, then my a	o far. Th or any ot dmission	nere is her relev in the N	no enquir ant author ational Ins	punished in an y pending agai ity in India or Al stitute of Techno tled to any claim	nst me v broad. In d logy, Sikl	with the Sc case the above kim may be o	hool/College/ we declaration cancelled, the
5. I ha	ve gone	e through the	e rules an	d regula	tions regard	ding ragging and	disciplin	es of the Inst	itution.
	ules. I v					he orders of the he rustication, an			
Date:							Signat	ure of Cand	lidate
myself period	respon he/she	sible for his is on the Ir	good con stitute Ro	nduct, ma olls. I ur	aintenance ndertake to	ssion with my keep of discipline, and make the paymely studied the ab	d timely p nent of M	eayment of fe	ees during the
Date:						Signature of	f Parents	/ Guardians	3
						Permanent A	Address:		
						Pin Code:			
						Email:			

Phone/Mobile: Pg-16