

अखिल भारतीय आयुर्विज्ञान संस्थान- मंगलगिरि ALL INDIA INSTITUTE OF MEDICAL SCIENCES – MANGALAGIRI

स्वास्थ्यऔरपरिवारकल्याणमंत्रालयकेतहतराष्ट्रीयमहत्वकासंस्थान (AN INSTITUTE OF NATIONAL IMPORTANCE UNDER MINISTRY OF HEALTH AND FAMILY WELFARE)

भारतसरकार / Government of India

DECLARATION BY THE OBC (NCL) CANDIDATE

Ι	Son/Daughterof	Village/Town/City
	District	
State	hereby declare that I belong to the community which is recognized as a backward	
class by the Govern	nment of India for the purpose of reservation in service as	s per orders contained in the Department
of Personal and Tra	aining office memorandum number36012/2293.Estt.(SCT) dated 08.09.1993.

It is also declared that I do not belong to person/section (creamy layer) mentioned in column 3 of the schedule to above referred office memorandum dated 08.09.1993.

Name: _____

Signature of the candidate_____

Address:_____