

Reference: DDA Recruitment 2016

Documents required to be produce at the time of Documents verification /Interview

- (i) System generated printout of application with candidate's scanned photograph and signature.
- (ii) Fee payment challan in support of depositing the prescribed fee.
- (iii) Certificate/ Marks-sheet of Secondary School Exam in which date of birth of the candidate is indicated.
- (iv) Degrees & Certificates of all educational and professional/ higher qualification, along with marks-sheets of all years/ semesters.
- (v) Certificate of SC/ST /OBC, as the case may be, issued by the concerned Competent Authority as per specimen attached. (if applicable)
- (vi) Employment Certificate, if you are an existing employee of DDA or anywhere in service. Candidates already employed with Govt. Departments/PSU/Autonomous Bodies will have to produce 'No Objection Certificate (NOC)' from the employer at the time of Joining Service, if offered appointment.
- (vi) Disability Certificate (Showing the type & percentage of disability) issued by the concerned competent authority as per specimen attached.
- (vii) Aadhaar Card, if not issued then registration slip for Aadhaar.
- (viii) Identity proof such as Voter ID Card, Passport, Driving License etc.
- (ix) All other documents, as per details given in the advertisement and/or call letter.
- (xi) In case a candidate does not appear before the interview board or for verification of documents /identity along with original documents, he/she shall not be eligible for appointment and his/her candidature shall be rejected. No second opportunity shall be provided for interview/ or verification of documents/identity in any case.
- (XII) Two passport size latest photographs.
- (XIII) **If you do not produce any of the above mentioned documents** in original (along with their attested copies) which are required for determining eligibility for the interview in question (as applicable), you will not be admitted for the interview under any circumstances whatsoever and no further opportunity will be accorded to take the interview.
- (XIV) Candidates who have applied under OBC category and have submitted OBC certificates in the prescribed format but the certificates do not carry latest amendments to the creamy layer notification issued by DOPT for determination of their creamy layer status, are required to obtain fresh certificate in the prescribed format (proforma enclosed) from the competent authority and produce it (in original) at the time of interview.

FORMAT FOR SC/ST CERTIFICATE

A candidate who claims to belong to one of the Scheduled Caste or the Scheduled Tribes should submit in support of his claim an attested/certified copy of a certificate in the form given below, from the District Officer or the sub-Divisional Officer or any other officer as indicated below of the District in which his parents(or surviving parent) ordinarily reside who has been designated by the State Government concerned as competent to issue such a certificate. If both his parents are dead, the officer signing the certificate should be of the district in which the candidate himself ordinarily resides otherwise than for the purpose of his own education. Wherever photograph is an integral part of the certificate, the Commission would accept only attested photocopies of such certificates and not any other attested or true copy.

(The format of the certificate to be produced by Scheduled Castes and Scheduled Tribes candidates applying for appointment to posts under Government of India)

This is to certify that Shri/Shrimati/Kumari* _____
son/daughter of _____ of village/town/* in
District/Division * _____ of the State/Union Territory* _____

belongs to the Caste/Tribes _____ which is recognized as a Scheduled
Castes/Scheduled Tribes* 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, 1956, the Bombay Reorganization Act, 1960 & the Punjab Reorganization Act, 1966,
the State of Himachal Pradesh Act 1970, the North-Eastern Area(Reorganization) Act, 1971
and the Scheduled Castes and Scheduled Tribes Order(Amendment) Act, 1976.

The Constitution (Jammu & Kashmir) Scheduled Castes Order, 1956 _____

The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959 as

amended by the Scheduled Castes and Scheduled Tribes order (Amendment Act), 1976*.

The Constitution (Dadra and Nagar Haveli) Scheduled Castes order 1962.

The Constitution (Dadra and Nagar Haveli) Scheduled Tribes Order 1962@.

The Constitution (Pondicherry) Scheduled Castes Order 1964@

The Constitution (Scheduled Tribes) (Uttar Pradesh) Order, 1967 @

The Constitution (Goa, Daman & Diu) Scheduled Castes Order, 1968@

The Constitution (Goa, Daman & Diu) Scheduled Tribes Order 1968 @

The Constitution (Nagaland) Scheduled Tribes Order, 1970 @

The Constitution (Sikkim) Scheduled Castes Order 1978@

The Constitution (Sikkim) Scheduled Tribes Order 1978@

The Constitution (Jammu & Kashmir) Scheduled Tribes Order 1989@

The Constitution (SC) orders (Amendment) Act, 1990@

The Constitution (ST) orders (Amendment) Ordinance 1991@

The Constitution (ST) orders (Second Amendment) Act, 1991@

The Constitution (ST) orders (Amendment) Ordinance 1996

The Scheduled Caste and Scheduled Tribes Orders(Amendment)Act,2002

The Constitution (Scheduled Caste) Orders (Amendment) Act,2002

The Constitution (Scheduled Caste and Scheduled Tribes) Orders (Amendment)Act,2002

%2. Applicable in the case of Scheduled Castes, Scheduled Tribes persons who have migrated from one State/Union Territory Administration.

This certificate is issued on the basis of the Scheduled Castes/ Scheduled tribes certificate issued to Shri/Shrimati _____ Father/mother _____ of _____

Shri/Srimati/Kumari* _____ of village/town* _____

_____ in District/Division* _____ of the 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/her family ordinarily reside(s) in village/town* _____ of _____ District/Division* _____ of the State/Union Territory of _____

Signature _____

** Designation _____

(with seal of office)

Place _____

Date _____

* Please delete the words which are not applicable

@ Please quote specific presidential order

% Delete the paragraph which is not applicable.

NOTE: The term ordinarily reside(s) used here will have the same meaning as in section 20 of the Representation of the People Act, 1950.

** **List of authorities empowered to issue Caste/Tribe Certificates:**

- (i) District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Dy. Collector/1st Class Stipendiary Magistrate/Sub-Divisional Magistrate/Extra-Assistant Commissioner/Taluka Magistrate/Executive Magistrate.
- (ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
- (iii) Revenue Officers not below the rank of Tehsildar.
- (iv) Sub-Divisional Officers of the area where the candidate and/or his family normally resides.

NOTE: ST candidates belonging to Tamil Nadu state should submit caste certificate ONLY FROM THE REVENUE DIVISIONAL OFFICER.

**(FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES
APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA)**

This is to certify that Shri /Smt./Kumari _____ son/daughter of
_____ of village/town _____

in District/Division _____ in the State/Union Territory
_____ belongs to the _____ Community which
is recognized as a backward class under the Government of India, Ministry of Social Justice
and Empowerment's Resolution No. _____ dated
_____. Shri/Smt./Kumari _____ and/or his/her
family ordinarily reside(s) in the _____ District/Division of the
_____ State/Union Territory. This is also to certify that he/she
does not belong to the persons/sections (Creamy Layer) mentioned in Column 3 of the
Schedule to the Government of India, Department of Personnel & Training O.M. No.
36012/22/93-Estt (SCT) dated 8.9.1993**.

District Magistrate: _____

Deputy Commissioner etc.: _____

Dated:

Seal:

* The authority issuing the certificate may have to mention the details of Resolution of Government of India, in which the caste of the candidate is mentioned as OBC.

** As amended from time to time.

Note: The term "Ordinarily" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

DISABILITY CERTIFICATE
(IN CASE OF AMPUTATION OR COMPLETE PERMANENT PARALYSIS OF
LIMBS AND IN CASES OF BLINDNESS)

(See rule 4)

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

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 Shri/Smt/Kum _____ Son/wife/daughter
of Shri _____ Date of Birth _____ Age
_____ years, male/Female _____

(DD/ MM/ YY)

Registration No. _____ permanent resident of House No _____
Ward/Village/Street _____ Post Office _____ District _____
State _____

Whose photograph is affixed above, and am satisfied that :

(A) he/she is a case of:

- locomotor disability
- blindness

(Please tick as applicable)

(B) The diagnosis in his/her case _____

(A) He/She has _____% (in figure) _____ percent (in words)
permanent physical impairment/blindness in relation to his/her _____ (part of
body) as per guidelines (to be specified).

2. The applicant has submitted the following document as proof of residence:-

Nature of Document	Date of Issue	Details of authority issuing certificate.

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

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

DISABILITY CERTIFICATE
(In case 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 No. _____

Date: _____

This is to certify that I have carefully examined Shri/Smt/Kum _____ Son/wife/daughter
of Shri _____ Date of Birth _____ (DD/MM/YY) Age _____ years,
male/Female _____ Registration No. _____ permanent resident of House
No. _____ Ward/Village/Street _____ Post Office _____
District _____ State _____ Whose photograph is affixed above, and am satisfied that
he/She is a Case of _____ disability. His/her extent of percentage physical
impairment/disability has been evaluated as per guidelines (to be specified) for the disabilities (to be
specified) and is shown against the relevant disability in the table below:-

S.No.	Disability	Affected part of the body	Diagnosis	Permanent physical impairment/mental disabilities (in %)
1.	Locomotor disability	@		
2	Low vision	#		
3.	Blindness	Both Eyes		
4.	Hearing impairment	\$		
5.	Mental retardation	X		
6.	Mental-illness	X		

(Please strike out the disabilities which are not applicable)

2. The above condition is progress/non progress/likely to improve/not likely to improve.

3. Reassessment of disability is:

(i) not necessary

Or

(ii) is recommended/after _____ years _____ on this, and therefore this certificate shall be valid till _____

(DD) (MM) (YY)

@ e.g. Left/Right/both arms/Legs

e.g. Single eye/both eyes

\$ e.g. Left/Right/both ears.

4. The applicant has submitted the following document as proof of residence:

Nature of Document	Date of issue	Details of authority issuing certificate

(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
certificates issued by a medical authority who is not a
permanent 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 countersigned by the Chief Medical Officer on the District.”