

**Seat Distribution for M.Tech. CSE, CSE (Research), ECE & CB for AY 2026-27**

M.Tech. Program	CSE		CSE- Research		ECE		CB		Total
Total Seats	145		10		85		44		
	GATE	NON-GATE	GATE	NON-GATE	GATE	NON-GATE	GATE	GAT-B	
<b>Total Seats</b>	<b>105</b>	<b>40</b>	<b>10</b>	<b>0</b>	<b>69</b>	<b>16</b>	<b>29</b>	<b>15</b>	<b>284</b>
<b>Total Gen</b>	<b>43</b>	<b>16</b>	<b>3</b>	<b>0</b>	<b>27</b>	<b>8</b>	<b>12</b>	<b>6</b>	<b>115</b>
GN	39	14	3	0	25	8	10	6	105
GNCW	2	1	0	0	1	0	1	0	5
GNPD	2	1	0	0	1	0	1	0	5
<b>Total SC</b>	<b>16</b>	<b>6</b>	<b>2</b>	<b>0</b>	<b>11</b>	<b>2</b>	<b>4</b>	<b>2</b>	<b>43</b>
SC	14	5	2	0	9	2	4	2	38
SCCW	1	0	0	0	1	0	0	0	2
SCPD	1	1	0	0	1	0	0	0	3
<b>Total OBC</b>	<b>28</b>	<b>11</b>	<b>3</b>	<b>0</b>	<b>19</b>	<b>4</b>	<b>8</b>	<b>4</b>	<b>77</b>
OB	25	9	3	0	17	4	8	4	70
OBCW	1	1	0	0	1	0	0	0	3
OBPD	2	1	0	0	1	0	0	0	4
<b>Total EWS</b>	<b>10</b>	<b>4</b>	<b>1</b>	<b>0</b>	<b>7</b>	<b>1</b>	<b>3</b>	<b>2</b>	<b>28</b>
EW	8	4	1	0	6	1	3	2	25
EWCW	1	0	0	0	1	0	0	0	2
EWPD	1	0	0	0	0	0	0	0	1
<b>Total ST</b>	<b>8</b>	<b>3</b>	<b>1</b>	<b>0</b>	<b>5</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>21</b>
ST	6	3	1	0	4	1	2	1	18
STCW	1	0	0	0	1	0	0	0	2
STPD	1	0	0	0	0	0	0	0	1
<b>Total</b>	<b>105</b>	<b>40</b>	<b>10</b>	<b>0</b>	<b>69</b>	<b>16</b>	<b>29</b>	<b>15</b>	<b>284</b>

- CW: Defence Category (Children/Widows of Personnel of the Armed Forces)
- PD: Differently-Abled Persons

### Reservation Policy

In Category	a) Scheduled Castes (SC):	15 % of the total seats
	b) Scheduled Tribes (ST):	7.5% of the total seats
	c) Other Backward Classes (OBC-NCL)	27% of the total seats
	d) Economically Weaker Section (EWS)	10% of total seats
In Sub-Category	e) Defence Category (CW)	5% of the total seats in each category are reserved for candidates belonging to the 'Defence Category' in various priority
	f) Differently-Abled Persons (PD)	5% of the total seats in each category are reserved for candidates belonging to the 'Differently Abled Person'

### Relaxation

In Category	Scheduled Castes (SC):	A relaxation of 10% marks in the eligibility requirements for the seats reserved for them
	Scheduled Tribes (ST):	A relaxation of 10% marks in the eligibility requirements for the seats reserved for them
	Other Backward Classes (OBC-NCL)	A relaxation of 5% marks in the eligibility requirements for the seats reserved for them
	Economically Weaker Section (EWS)	No relaxation for EWS
In Sub-Category	Defence Category(CW)	A relaxation of 5% marks in the eligibility requirements for the seats reserved for them.
	Differently-Abled Persons (PD)	A relaxation of 5% marks in the eligibility requirements for the seats reserved for them

### Conversion of Seats

In the case of categories (a) and (b) of SC and ST, the vacant seats are interchangeable. If the merit list is exhausted for SC & ST, then the vacancies will be treated as unreserved.
If sufficient numbers of eligible candidates from the categories mentioned in (c) and (d) are NOT available, the vacancies will be treated as unreserved.
Seats under category (f) are interchangeable within the category if sufficient candidates are not available in a particular sub- category.
In case a sufficient number of eligible candidates from the categories mentioned in (e) and (f) above are not available, the vacancies will be treated as unreserved in the respective category.
<b>Note: The conversion of seats will be made in the round where the merit list is exhausted in the respective category.</b>

## **Certificates to be Produced with Respect to Reserved Categories**

Candidates applying for any reserved seat (i.e. SC, ST, OBC-NCL, EWS, CW and PD) must produce the original certificates (as applicable) as mentioned below at the time of document verification.

### **SC/ST/OBC-NCL Candidates**

For admission to a seat reserved for Scheduled Caste/Scheduled Tribe/Other Backward Class (NCL)/EWS, the candidate must produce a certificate, in original, issued from an approved district authority stating the Scheduled Caste/ Scheduled Tribe/Other Backward Class (NCL)/EWS, to which the candidate belongs. A list of approved authorities is given below:

1. District Magistrate / Additional Magistrate / Deputy Commissioner / Collector / Additional Deputy Commissioner / Deputy Collector / 1st Class Stipendiary Magistrate / City Magistrate (not below the rank of 1st Class Stipendiary Magistrate), Sub- Divisional Magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner.
2. Revenue Officer not below the rank of Tehsildar.
3. Sub-Divisional Officer of the area where the candidates and/or his/her family normally resides.
4. Administrator/Secretary to Administration/Development Officer (Laccadive & Minicoy Islands).

#### **NOTE:**

1. Caste name as mentioned in the OBC Certificate MUST exactly match with the name of the caste listed at: [https://www.nbc.nic.in/User\\_Panel/CentralListStateView.aspx](https://www.nbc.nic.in/User_Panel/CentralListStateView.aspx)
2. The candidate seeking admission under reserved categories has to mandatorily produce the caste/category certificate in his/her name at the time of counselling. The certificate in the name of either of the parents (Mother/Father) or any other family member is unacceptable, and the candidate will not be entitled even for provisional admission.
3. The reservation certificate should be issued from the respective state/region in which the reservation is being claimed, e.g., in case, a candidate claims the seat reserved for the Delhi Region category, he/she has to bring SC / ST / OBC certificate issued by Govt. of N.C.T. of Delhi and should have also passed his/her qualifying examination from a College / Institute located in National Capital Territory of Delhi.
4. OBC (NCL) candidates are required to produce a caste certificate issued after March 31 2025, from the authorities as mentioned above. However, if the certificate is issued prior to March 31, 2025, it must be accompanied by an additional certificate regarding the present non-creamy layer status of the candidate, issued by the same competent authority. This additional certificate must have a reference to his/her already issued original caste certificate.

## **Economically Weaker Section (EWS)**

### **Criteria for Income and Assets:**

The benefits of reservation under EWS can be availed by persons who are not covered under the scheme of reservation for SCs, STs, and OBCs upon production of an Income and Asset Certificate issued by a competent authority based upon the following criteria:

Candidates whose family has a gross annual income below Rs. 8.0 lakh (Rupees eight lakh only) are to be identified as EWSs for benefit of reservation. Income shall also include income from all sources i.e., salary, agriculture, business, profession, etc., for the financial year prior to the year of application.

Also, persons whose family owns or possesses any of the following assets shall be excluded from being identified as EWS, irrespective of the family income: -

1. 5 acres of agricultural land and above;
2. Residential flat of 1000 sq. ft. and above;
3. Residential plot of 100 sq. yards and above in notified municipalities;
4. Residential plot of 200 sq. yards and above in areas other than the notified municipalities.

The property held by a "Family" in different locations or different places/cities would be clubbed while applying the land or property holding test to determine EWS status.

The term "Family" for this purpose will include the person who seeks the benefit of reservation, his/her parents and siblings below the age of 18 years, as also his/her spouse and children below the age of 18 years.

The benefit of reservation under EWS can be availed upon production of an Income and Asset Certificate issued by a Competent Authority after March 31, 2025. The Income and Asset Certificate issued by any one of the following authorities in the prescribed format as given in Annexure (placed at the end) shall only be accepted as proof of the candidate's claim as belonging to EWS:-

1. District Magistrate / Additional District Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / 1st Class Stipendiary Magistrate / Sub-Divisional Magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner
2. Chief Presidency Magistrate/Additional Chief Presidency Magistrate/ Presidency Magistrate
3. Revenue Officer not below the rank of Tehsildar and
4. Sub-Divisional Officer or the area where the candidate and/or his family normally resides.

### **PD Category**

5% of the total seats in each main category are reserved for candidates belonging to Differently-Abled Persons (PD) sub-category in the following order of priority. For admission to a seat reserved for the Differently-Abled Persons (PD) sub-category, the candidate must produce the following certificates (as per the format available at the end) in original at the time of document verification for PD candidates:

1. A certificate of physical disability issued by the Competent Authority as per the provision of the Persons with Disabilities Act 2016 in the prescribed format as given under the Act.
2. A suitability certificate.
3. The Candidate with benchmark disabilities shall produce the medical certificate issued by the Govt. Hospitals duly notified by the Govt. of N.C.T. of Delhi/Other State government and further duly verified by the Chief Medical Officer of the concerned Government Hospital.
4. A certificate, duly recommended by any of the Vocational Rehabilitation Centres for the handicapped, including Vocational Rehabilitation Centre for the handicapped, 9-11 Vikas Marg, Karkarduma, Delhi 110092, established by the Ministry of Labour and Employment.

### **CW Category**

5% of the total seats in each main category are reserved for candidates belonging to Defence (CW) sub-category in the following order of priority. For admission to a seat reserved for the Defence (CW) sub-category, the candidate must produce the following certificates (as per the format available at the end) in original at the time of document verification for CW candidates:

**Priority I** - Widows/wards of Defence personnel killed in action. Required Certificate (Proof in Original)

- a. Service particulars with family details
- b. PPO of Liberalised Family Pension
- c. Education Concession Certificate/Widow I-Card issued by Zila/Rajya/Kendriya Sainik Board

**Priority II** - Wards of disabled in action and boarded out / invalid out from service. Required Certificate (Proof in Original)

- a. Discharge Certificate with family details
- b. PPO of War Injury
- c. Original disability certificate clearly indicating the disability is attributable to Military Services and was boarded out
- d. Education Concession Certificate/War disabled I-Card issued by Zila/Rajya/Kendriya Sainik Board

**Priority III** - Widows/wards of Defence Personnel who died while in service with death attributable to military service. Required Certificate (Proof in Original)

- a. Service particulars
- b. PPO of Special Family Pension with death attributable to Military Service
- c. Education Concession Certificate/Widow I-Card issued by Zila/Rajya/Kendriya Sainik Board

**Priority IV** - Wards of disabled in service and boarded/invalid out with disability attributable to military service. Required Certificate (Proof in Original)

- a. Discharge Certificate with remarks – medical boarded out, disability attributable to military service
- b. PPO
- c. Education Concession Certificate/ I-Card issued by Zila/Rajya/Kendriya Sainik Board

**Priority V** - Wards of Ex-Servicemen and serving personnel/para military/police personnel who are in receipt of the following Gallantry Awards:

- i. Param Vir Chakra
- ii. Ashok Chakra
- iii. Maha Vir Chakra
- iv. Kirti Chakra
- v. Vir Chakra
- vi. Shaurya Chakra
- vii. Sena/ Nau Sena/ Vayu Sena Medal
- viii. Mention-in-Despatches
- ix. President's Police Medal for Gallantry
- x. Police Medal for Gallantry

Required Certificate (Proof in Original) a. Retired Personnel discharge Certificate/Service Particulars b. PPO c. Proof of Gallantry Award d. Education Concession Certificate/ ESM I-Card issued by Zila/Rajya/Kendriya Sainik Board (In case of serving awardees, education concession certificate will be issued by Unit and countersigned by Zila/Rajya/Kendriya Sainik Board with proof of Gallantry Award)

**Priority VI** – Wards of Ex-Servicemen. Required Certificate (Proof in Original):

- a. Discharge Certificate /Service Particulars
- b. Original ex-servicemen Identity Card
- c. PPO 42
- d. Education Concession Certificate/ ESM / Widow I-Card issued by Zila/Rajya/Kendriya Sainik Board

**Priority VII – Wives of:**

- i. defence personnel disabled in action and boarded out from service.  
Required Certificate (Proof in Original):  
Original disability certificate clearly indicating the disability is attributable to Military Services in action and was boarded out
  
- ii. defence personnel disabled in service and boarded out with disability attributable to military service. Required  
  
Certificate (Proof in Original):  
Original disability certificate clearly indicating the disability is attributable to Military Services and was boarded out.
  
- iii. ex-Servicemen and serving personnel who are in receipt of Gallantry Awards.  
  
Required Certificate (Proof in Original):  
Only the Gallantry Awards specified in Priority V shall be considered

**Priority VIII – Wards of Serving Personnel. Required**

Certificate: (Proof in Original)

Original Service Identity Card and Dependent Card/ Certificate issued by the Competent Authority.

**Priority IX – Wives of Serving Personnel. Required**

Certificate: (Proof in Original)

Original Service Identity Card and Dependent Card/ Certificate issued by the Competent Authority.

**Certificates and Formats**

The formats of some of the required certificates are printed below for the guidance for the candidates. **Separate certificates bearing the same data as specified in these sample formats are also acceptable.** Original certificates, as prescribed, should be signed by the authorities mentioned therein, under the legible seal of office.

**1. Certificate in Respect of Defence Category (CW)**

**CERTIFICATE FOR AVAILING ADMISSION AGAINST DEFENCE QUOTA  
OFFICE OF THE ZILA/RAJYA/KENDRIYA SAINIK BOARD**

This is to certify that Master /Miss .....Son/daughter of  
.....resident of  
....., the above named officer/ JCO / OR pertains to the category  
marked below:- (Select one from below)

- (a) Killed in Action on .....during.....
- (b) Disabled in Action on ..... and boarded out from service on  
..... during.....
- (c) Died in peace time on ..... with death attributable to military service
- (d) Disabled in peace time and boarded out from service with disability attributable military service.
- (e) Gallantry Award Winner (.....)
- (f) Ex-Serviceman.

(g) Wives of:

- i. defence personnel disabled in action and boarded out from service where disability is attributable to Military Services in action.
  - ii. defence personnel disabled in service and boarded out with disability attributable to military service.
  - iii. ex-Servicemen and serving personnel who are in receipt of Gallantry Awards.
- (h) Wards of Serving Personnel  
(i) Wives of Serving Personnel (Category

\_\_\_above)

Mr./Miss..... son/daughter of the above named officer/JCO/OR is eligible  
for Admission in IIT-Delhi against the Defence quota under priority  
.....

His/her Ex-Serviceman Widow Identity Card No. is DLH-01.....

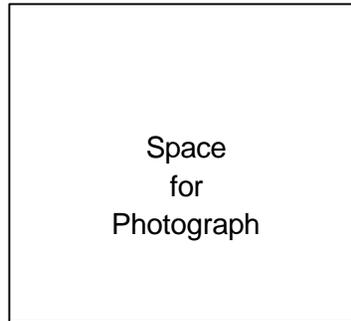
NO. ..../  
stamp of Office)

RSB SECRETARY (Round  
(Zila/Rajya/Kendriya Sainik Board)

## 2. Medical Fitness Certificate

(To be signed by a registered medical practitioner holding a Medical Degree)

**(TO BE SUBMITTED AT THE TIME OF ADMISSION)**



I certify that I have carefully examined Mr./Ms.\*\_Son/daughter of Shri\_\_\_\_\_ whose signature is given below. Based on the examination, I certify that he/she is in good mental and physical health and is free from any physical defects which may interfere with his/her studies including the active outdoor duties required of a professional.

Marks of Identification \_\_\_\_\_

Signature of the Candidate \_\_\_\_\_

Place: Date:

Name & signature of the Medical Officer with  
seal and registration number

\* Strike whichever is not applicable.

### 3. Certificate for Differently Abled Person (PD)

#### To be issued by Medical Board from Government Hospital

Name of the candidate: Mr./Ms. \* \_\_\_\_\_

Father's Name: \_

Permanent Address : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Percentage loss of earning capacity (in words):

\_\_\_\_\_

Whether the candidate is otherwise able to carry on the studies and perform the duties of an engineer/architect satisfactorily: \_\_\_\_\_

Name of the disease causing handicap: \_\_\_\_\_

Whether handicap is temporary or permanent: \_\_\_\_\_

Whether handicap is progressive or non-progressive: \_\_\_\_\_

The candidate is FIT / UNFIT to pursue the engineering studies. (\*Strike out whichever is not applicable)

\_\_\_\_\_  
Doctor

\_\_\_\_\_  
Doctor

\_\_\_\_\_  
Chief Medical Officer

Date:

Seal of Office

#### NOTE:

1. The medical board must have three members.
2. Candidate having temporary or progressive handicap will not be considered against these seats.



**Form-I**

**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)**

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

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:

1. he/she is a case of:
  - a. locomotor disability
  - b. blindness(Please tick as applicable)
2. the diagnosis in his/her case is \_\_\_\_\_
3. 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).
4. 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

**Form  
II**

Disability Certificate  
(In cases of multiple disabilities)

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

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

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 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.	Disability	Affected Part of Body	Diagnosis	Permanent physical impairment/mental disability (in %)
1	Locomotor disability	@		
2	Low vision	#		
3	Blindness	Both Eyes		
4	Hearing impairment	£		
5	Mental retardation	X		
6	Mental-illness	X		

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

# - e.g. Single eye/both eyes

£ - e.g. Left/Right/both ears

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 is:

a. not necessary

b. is recommended/after \_\_\_\_\_ years \_\_\_\_\_ months, and therefore this certificate shall be valid till (DD/MM/YY) \_\_\_\_\_.

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

Nature of Document	Date of Issue	Details of authority issuing certificate

6. Signature and seal of the Medical Authority:

Nature of Document	Date of Issue	Details of authority issuing certificate
Name and Seal of Member	Name and Seal of Member	Name and Seal of Chair Person

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

Disability Certificate  
(In cases other than those mentioned in Forms I and II)  
**(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 (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.

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/mental disability (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.)

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

# - e.g. Single eye/both eyes

£- e.g. Left/Right/both ears

2. The above condition is progressive/ non-progressive/ likely to improve/ not likely to improve.
3. Reassessment of disability is:
  - a. not necessary
  - 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

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

Countersigned

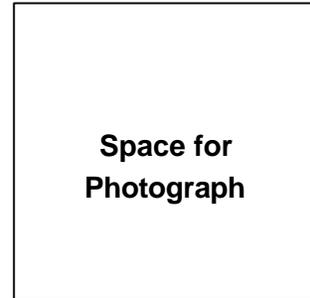
{Countersignature and seal of the CMO/Medical Superintendent/Head of Government Hospital, in case the certificate is issued by a medical authority who is not a government servant (with seal)}

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

**4. Suitability Certificate for Availing Admission against Differently Abled Person (PD)**

**(To be submitted at the Time of Counselling/Admission)**



Certified that Shri / Km/ Smt. \* \_\_\_\_\_  
son/daughter/wife of Shri/Smt. \_\_\_\_\_ is physically  
handicapped due to \_\_\_\_\_ and  
he/she is fit for undergoing the course(s) \_\_\_\_\_  
\_\_\_\_\_ at IIITD.

Name & Signature of The  
Officer In-charge  
Vocational Rehabilitation Centre for Physically Handicapped 9,10,11  
Karkardooma,  
Vikas Marg, Delhi-110092.

**5. Certificate for Economically Weaker Section (EWS)**

**Government of \_\_\_\_\_**  
**(Name & Address of the authority issuing the certificate)**

**INCOME & ASSEST CERTIFICATE TO BE PRODUCED BY CANDIDATES SEEKING  
RESEWRVATION UNDER ECONOMICALLY WEAKER SECTIONS**

Certificate No. \_\_\_\_\_

Date: \_\_\_\_\_

VALID FOR THE YEAR \_\_\_\_\_

1. This is to certify that Shri/Smt./Kumari \_\_\_\_\_ son/daughter/wife of \_\_\_\_\_ permanent resident of \_\_\_\_\_, Village/Street Post. Office \_\_\_\_\_ District \_\_\_\_\_ in the State/Union Territory Pin Code whose photograph is attested below belongs to Economically Weaker Sections, since the gross annual income\* of his/her I family\*\* is below Rs. 8 lakh (Rupees Eight Lakh only) for the financial year \_\_\_\_\_ His/her family does not own or possess any of the following assets\*\*\* :

- i) 5 acres of agricultural land and above;
- ii) Residential flat of 1000 sq. ft. and above;
- iii) Residential plot of 100 sq. yards and above in notified municipalities;
- iv) Residential plot of 200 sq. yards and above in. areas other than the notified municipalities.

2. Shri/Smt./Kumari \_\_\_\_\_ belongs to the caste \_\_\_\_\_ which is not recognized as a Scheduled Caste, Scheduled Tribe and Other Backward Classes.

Signature with seal of Office \_\_\_\_\_

Name \_\_\_\_\_

Designation \_\_\_\_\_



\*Note 1: Income covered all sources i.e. salary, agriculture, business, profession, etc.

\*\*Note 2: The term 'Family' for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years

\*\*\*Note 3: The property held by a 'Family' in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.