APPLICATION NO.	
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To,

FORM-I OFFICE OF THE DEPUTY COMMISSIONER LOHIT JAN SUVIDHA KENDRA



Affix recent passport size photo duly attested by the Administrative Office of the Concerned Circle

APPLICATION FORM FOR SCHEDULED TRIBE CERTIFICATE

	I am to state that I am a	person be	longing	to Aru	nachal	Prades	n Schod		Tatle - 1			
for belo	The same and the s	g prescrib	ed pro	forma,	or which	ch part	iculars a	and de	eclarat	nereption ar	y app e give	y n
1.	FULL NAME OF THE PERS Shri/Smti/Ms.	ON FOR W	ном /	APST CE	RTIFICA	TE IS R	EQUIRE	D (IN	BLOCK	LETTE	RS):	
	to St of concerned PS to b			4	100						atigate	
2.	FATHER'S NAME (IN CAP	TAL LETTE	RS):						1		1	
	Late/Shri					nu.	MBOT	10.0		715		0
3.	FATHER'S TRIBE:	17.										1
	MOTHER'S NAME (IN CAF Late/Smti	PITAL LETT	ERS):		T						-	_
i.	MOTHER'S TRIBE:			12.31								
	PERMANENT ADDRESS:			no significant	MONTH I	ne bene	nd selec		eli ge elia hi	4.9.10	P I I	
ILLA	AGE/TOWN									1	1 3 -	7
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	RICT			4		4	1		4	1	4	1
ISTE	E: ARUNACHAL PRADESH										120	
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PPLICATION NO				

10. WHETHER FATHER OR ANY OF THE PATERNAL BLOOD RELATIVES OF THE PERSON FOR WHOM APST CERTIFICATE IS APPLIED FOR POSSESSES APST CERTIFICATE? IF 'YES', GIVE THE FOLLOWING DETAILS:

Name of Certificate Holder	Relation with the person for whom APST Certificate is applied for	Certificate No	Date of Issue	Issuing Authority
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years quested kdeft a	a ubara ngagari magana	of patentied no	that I ust a pen	elnie ot me i

11. FOR CORRECTION OF APST CERTIFICATE OR ISSUANCE OF DUPLICATE APST CERTIFICATE:

(Original APST	ection of APST Cer Certificate to be su se of any correction	te to be surrendered in (Lost Certificate issued by OC of concerned PS		
Original STC Number	Date of Issue	Issuing Authority	Lost Certificate Number	Date of Issue
			AZMINITAL LATION	

DECLARATION

I do hereby declare that I am a citizen of India and that the information/particulars furnished above are true and correct to the best of my knowledge and belief. I shall be liable to such penal action as provide for in law if any of these particulars is proved to be false.

Signature:	
	Name:
	(Self/Father/Mother/Guardian)

(In the case of a minor, the declarant shall be the father or if father is not alive, the mother and if neither of the parents are alive, the legal guardian of such minor can sign the application).

ENCLOSURE:

- 6 nos of recent passport size photograph.
- 2. Birth Certificate/Matriculation Certificate/ Aadhar Card/EPIC
- 3. APST Certificate of the applicant's father or of any relative having direct blood relation with the applicant from the paternal side.
- 4. Surrender Case: Original ST Certificate has to be surrendered

APPLICATIO	NI NIO

FORM – IX DECLARATION BY 1ST/ 2ND REFEREE

	DECLARATION OF 1 ST REFEREE
I hereby declare that Shri/Sm	nti/Miss son/daughter
of Shri/Late	of village
	, PO, Lohit District is personally known
to me. Shri/Smti/	Miss belongs to
	(tribe), which is recognized as Scheduled Tribe of the state of Arunachal
Pradesh. The applicant is	my (relation). I have Arunachal Pradesh
Scheduled Tribe Certificate, a	an attested copy of which I submit herewith in my favor. I accept the full legal
responsibility in giving this de	claration.
	Particulars of 1 st referee:
	Full Name:
	Tribe:
	Place of Birth:
	Full Address:
	Relationship with the applicant:
Costa	(Phato should its atrested by the Residut dis Vin Heatler Creat
(as the	DECLARATION OF 2 nd REFEREE
1 hereby declare that Shri/Sn	DECLARATION OF 2 nd REFEREE
1 hereby declare that Shri/Sn	DECLARATION OF 2 nd REFEREE nti/Miss son/daughter
of Shri/Late	DECLARATION OF 2 nd REFEREE nti/Miss son/daughter of village
of Shri/Late	DECLARATION OF 2 nd REFEREE nti/Miss son/daughter
of Shri/Late	DECLARATION OF 2 nd REFEREE nti/Miss son/daughter of village, Lohit District is personally known to me. Shri/Smti/Miss
of Shri/Late	DECLARATION OF 2 nd REFEREE nti/Miss son/daughter of village , Lohit District is personally known to me. Shri/Smti/Miss belongs to (tribe), which is
of Shri/Late PO recognized as Scheduled	DECLARATION OF 2 nd REFEREE nti/Miss son/daughter of village, Lohit District is personally known to me. Shri/Smti/Miss belongs to (tribe), which is Tribe of the state of Arunachal Pradesh. The applicant is my
of Shri/Late PO recognized as Scheduled	DECLARATION OF 2 nd REFEREE nti/Miss son/daughter of village , Lohit District is personally known to me. Shri/Smti/Miss belongs to (tribe), which is Tribe of the state of Arunachal Pradesh. The applicant is my (relation). I have Arunachal Pradesh Scheduled Tribe Certificate, an
of Shri/Late PO recognized as Scheduled attested copy of which I sub	DECLARATION OF 2 nd REFEREE nti/Miss son/daughter of village , Lohit District is personally known to me. Shri/Smti/Miss belongs to (tribe), which is Tribe of the state of Arunachal Pradesh. The applicant is my (relation). I have Arunachal Pradesh Scheduled Tribe Certificate, an
of Shri/Late PO recognized as Scheduled attested copy of which I sub	DECLARATION OF 2 nd REFEREE nti/Miss son/daughter of village of village of village (tribe), which is belongs to (tribe), which is tribe of the state of Arunachal Pradesh. The applicant is my (relation). I have Arunachal Pradesh Scheduled Tribe Certificate, an omit herewith in my favor. I accept the full legal responsibility in giving this Particulars of 2 nd referee:
of Shri/Late PO recognized as Scheduled attested copy of which I sub	DECLARATION OF 2 nd REFEREE nti/Miss son/daughter of village, Lohit District is personally known to me. Shri/Smti/Miss belongs to (tribe), which is Tribe of the state of Arunachal Pradesh. The applicant is my (relation). I have Arunachal Pradesh Scheduled Tribe Certificate, and omit herewith in my favor. I accept the full legal responsibility in giving this Particulars of 2 nd referee: Full Name:
of Shri/Late PO recognized as Scheduled attested copy of which I sub	DECLARATION OF 2 nd REFEREE nti/Miss son/daughter of village
of Shri/Late PO recognized as Scheduled attested copy of which I sub	DECLARATION OF 2 nd REFEREE nti/Miss son/daughter of village

APPLICATION NO.

EAC (Head of

Verification Committee)

2.

FORM -VII

(For Urban Areas)

in respect of Application No is a persident of village/town under Tribe which is recognized and belongs to the Tribe which is recognized and process of the said District of the State of Arunachal Pradesh constitution (Scheduled Tribes) Order, 1950 and subsequent Amendment Acts/Orders. Space for affixing a clear passport size photograph of the applicant	that	Shri/Smti/Miss		son/daughter	of
village/town under	-USA	Entrated to the service service	in respect		
phit District of Arunachal Pradesh and belongs to the Tribe which is recognized runachal Pradesh Scheduled Tribe in respect of the said District of the State of Arunachal Pradesh constitution (Scheduled Tribes) Order, 1950 and subsequent Amendment Acts/Orders. Space for affixing a clear passport size photograph of	esider	nt of			
runachal Pradesh Scheduled Tribe in respect of the said District of the State of Arunachal Pradesh constitution (Scheduled Tribes) Order, 1950 and subsequent Amendment Acts/Orders. Space for affixing a clear passport size photograph of	ohit D	District of Arunachal Prades	h and belongs to the	Tribe whic	n is reco
- Considerate and Allin and the Constant			Space for affixing a clear passport size photograph of		Pradesn
			See III-16		2/2/0
ame and Signature of the Members of the Verification Committee	I NO.	Designation	Name	Signature with Seal	
No. Don't get Don't get	the s	Officer-in-Charge (Local Police Station)		sit in ager balancers o	logic

APPLICATION	NO.

FORM-IV (IN CASE OF URBAN AREAS)

CERTIFICATE FROM RECOMMENDING COMMITTEE

Shri/Smti/Miss				of Shri/Shrimati/Late
and belongs to the of the State of Arunachal Amendment Acts/Orders.	village under Tribe which i	is recognized as a	circle of <u>Lohit</u> Dis Scheduled Tribe in	
	Space for affixing a clear passport size photograph of the applicant	Space for affixing a clear passposize photograph of the applica	ort oh	

(Photos should be attested by the Head of the Recommending Committee).

Certified that the above satisfaction has been arrived after following the provisions and procedure laid down in the Arunachal Pradesh Scheduled Tribe Certificate Issuance Guidelines, 2022 notified vide Notification No. SJETA/WCD-14/2019 dated 01/08/2022

The Recommending Committee therefore recommends issuance of ST Certificate to the above named person. The Recommending Committee is both jointly and severally responsible for the above recommendation.

Name and Signature of the Members of the Recommending Committee

Sl No.	Designation	Name	Signature with Seal
1.	GB Tamla Nagar (Member)		
2.	Member of Concerned APEX CBO (Member)		
3.	Circle Officer (Head of Recommending Committee)		