### ANNEXURE I

# $\frac{\text{APPLICATION FOR CORRECTION/ALTERATION OF DATE OF BIRTH IN SCHOOL RECORDS}}{\text{AND QUALIFICATION CERTIFICATES}}$

## (To be routed through the Headmaster of the School in which the person last attended)

	1. Name (in block	
	capitals)	
	2. Address	
Name and Address of Applicant	District Pin Code	
	3. If belongs to SC/ST state the caste (evidence to be enclosed)	
	1. Name (in block capitals)	
2. Details of person whose date of birth is to be corrected/altered	2. Relationship with the applicant	
to be corrected aftered	3. Place of Birth	
	4. Panchayat/Muncipalities/Corporation	
	5. Designation (if employed)	
	6. Official Address	
	7. Name of first school attended	
	8. Standard on admission Date of Admission	
	9. Completed age at the time of admission	
	10. Name of School last attended	
	11. Date of leaving the school	
	Reason for leaving	
3. Qualification Certificates in which correction/alteration is desired (SSLC with Reg. No. and Year)		
4.Nature of correction/alteration	Existing date of birth	
	Proposed date of birth( documentary evidence produced)	as per
5. Explanation as to how the incorrect date of birth happened to be entered in school records and qualification		
certificates and how the mistake came to the notice of the applicant		
The state of the s		

6 State whether the present application is	Yes/No			
6. State whether the present application is within 15 years from the date of leaving	(Strike out which is not applicable)			
the School	(Strike out which is not applicable)			
7. If not, details of government Orders				
condoning delay, in relaxation to Rule 3, Ch. VI of KERs	G.O. (Rt.) No			
CII. VI OI KEKS	dated			
	(Original to be enclosed)			
8. Documentary evidences produced to	, <u> </u>			
prove the correct date of birth				
9. Details of affidavit sworn in				
	DateName of Deponent			
	Name of Natara Dahlia/Indiaial Officer			
	Name of Notary Public/Judicial Officer			
10. Details of application fee remitted				
	Amount Chalan No			
	DateName of Treasury			
	Date			
11. State whether the person has applied				
for correction of date of birth at any				
previous occasions, and if so furnish details thereof				
12. Details of other members in the	Sl. Name Date of File Number			
family applied for correction of date of	No application (if know)			
birth	11 , , , ,			
12 Dataile of hinth a common as in the four				

#### 13. Details of birth occurrence in the family ( in the order of birth occurrence)

Sl. No	Name of Child	Sex	Date of birth as per birth register	Date of birth as per baptism records (for Christian community only)	Date of birth as per School records

I do hereby declare that the details furnished above are true to the best of my knowledge and belief. I am fully aware that, in case any false information is detected in future at any stage, my application is liable to be rejected and that it is open to the Department to take appropriate action against me.

Place:	
Date:	Signature of applicant

### ANNEXURE II

# STATEMENT SHOWING THE PARTICULARS OF EDUCATIONAL INSTITUTIONS ATTENDED FROM STANDARD I TO $\mathbf X$

Sl.	Name of	fame of	Date of	Standard	Date of	Date of	Standard
No	School	Panchayat/Muncipality/Corporation	admission	to which	birth	leaving	at the
	with full	in which the school is located	in the	admitted	entered	in	time of
	postal		School		in the	School	leaving
	address		with		School		
	including		admission		records		
	District		No.				
	and Pin						
	Code						
1	2	3	4	5	6	7	8

Name and Signature of the Applicant

### ANNEXURE-III

## FORM OF IDENTIFICATION CERTIFICATE FROM THE LOCAL TAHSILDAR/VILLAGE OFFICER

No	Name and address of Office
	Date
	IDENTIFICATION CERTIFICATE
	ale child born to Sri
enter the full name and addre of the SSLC with	and whose birth was registered at the Panchayat/Muncipality/Corporation with Register No
Nosame person.	issued by the Headmaster are one and the
Office Seal	Signature

Name and Designation

# AFFIDAVIT NO.I (IN STAMP PAPER) (To be sworn by the person whose date of birth is to be altered)

aged	years and nov	v residing at		
	n and declare as follows			(give full address)
my mother Smt.			child and all the heir names and other de	children except
Sl. No	Name	Male/Female	Date of Birth	Place of Birth
1	2	3	4	5
My parents are alive/ The facts given above	not alive. are true to the best of n	ny knowledge and belie	of.	
Place: Date: Signed before me:	Signature of the Deponent (To be signed before a Notary Public/Judicial Officer)			

Name, Seal and Signature of the Notary Public/Judicial Officer

# AFFIDAVIT NO.II (IN STAMP PAPER) (To be sworn by the parent of pupil on roll of a school)

aged	years	son/daughter of and now residing at			
	affirm and declare as	follows:		(give full address)	
		d (ren) born to me by my w (nan Their names and other deta	ne and address) an		
Sl. No	Name	Male/Female	Date of Birth	Place of Birth	
1	2	3	4	5	
of person whos		birth ofs to be altered) is			
		est of my knowledge and b	elief.		
Place : Date : Signed before me	:	Signature of the Deponent (To be signed before a Notary Public/Judicial Officer)			

Name, Seal and Signature of the Notary Public/Judicial Officer