

**UNION PUBLIC SERVICE COMMISSION**  
**ASSISTANT PROVIDENT FUND COMMISSIONER IN THE EMPLOYEES'**  
**PROVIDENT FUND ORGANIZATION (EPFO), 2023**  
**INSTRUCTIONS TO CANDIDATES FOR FILLING IN THE DETAILED APPLICATION**  
**FORM**

The candidates should read these instructions carefully before filling in the online Detailed Application Form. The candidate should also scan their relevant original documents as listed below in 200 dpi grey scale and convert to a single pdf file up to 2 mb, before filling in the online Detailed Application Form (DAF). The pdf file so created must not be password protected and it should be uploaded along with the online submission of DAF.

(I) Scanned copy of the certificate of age.

(II) Scanned copy of the certificates showing his/her educational qualification prescribed in the Special Advertisement No. 51 - 2023 (Vacancy No. 23025102725) dated 25th Feb.2023.

(III) Scanned copy of the certificate in support of claim to belong to Scheduled Castes/ Scheduled Tribes/Other Backward Classes/EWS/Person with Benchmark Disability (wherever applicable).

(IV) A scanned copy of Undertaking duly signed by the candidate seeking relaxation as OBC candidate in support of claim of not belonging to creamy layer, to be given in format as mentioned in para B-1 of Appendix I.

(V) Scanned copy of the certificate in support of claim of age relaxation, wherever applicable.

(VI) Scanned copy of the certificate in support of claim to being Persons with Benchmark Disability ( wherever applicable).

(VII) Scanned copy of the undertaking duly signed by the candidate if already in Government Service.

(VIII) A duly filled in and signed proforma given as EWS Annexure to Detailed Application Form by the candidate, seeking reservation as EWS candidate.

**Duly signed copy of the online Detailed Application Form alongwith originals of the above certificates are required to be produced along with self certified copies of all the documents at the time of interview or within the last day of interview, which will be published in the Commission's website in due course, failing which their candidature is liable to be cancelled. It may also be noted that in no case the last date of verification of certificates will be extended. Candidates must also note that they should upload only the scanned copies of the original documents and no document is required to be sent by post.**

2. Candidates are advised to read carefully all the conditions and eligibility etc. as published in the Special Advertisement No. 51 - 2023 (Vacancy No. 23025102725) dated 25<sup>th</sup> Feb.2023. They should note that no correspondence will be entertained by the Commission from candidates to change any of the entries made in the application form. They should, therefore, take special care to fill up the online application form correctly.

In case there are any incomplete or misleading entries, the candidates will be responsible for the consequences thereof.

3. The information earlier given by candidates in the application form for the Examination will be cross-checked with the information given by them in this application form. If there are any serious discrepancies, their candidature will be cancelled.

4. A candidate who claims to belong to any of the Scheduled Castes, the Scheduled Tribes or the Other Backward Classes should submit in support of his/her claim a **scanned** copy of the certificate in the form given in **Appendix-I** from the District Officer or the Sub-Divisional Officer or any other officer as indicated therein, of the district in which his/her parents (or surviving parents) ordinarily reside. Such an officer should have been designated by the State Government concerned as competent to issue such a certificate. If both his/her parents are dead, the officer signing the certificate should be of the district in which the candidate himself/herself ordinarily resides otherwise than for the purpose of his/her own education.

**Note 1: Candidates should note that their SC/ST/PwBD/Ex-servicemen certificate should have been issued latest by the closing date of application for Assistant Provident Fund Commissioner in the Employees' Provident Fund Organization (EPFO), 2023 [i.e. 17.03.2023].**

**Note 2: EWS Category candidates should note that 'Income and Asset Certificate' must be issued in prescribed format and must be valid for the Financial Year 2022-23 (i.e. for the period 1st April, 2022 to 31st March, 2023) in support of their claim. Certificate valid for any other Financial Year shall not be treated as valid. Such candidates must meet the Income and Asset criteria issued by the Central Government.**

**Note 3: The OBC category candidates should note that the OBC (Non-Creamy Layer) certificate must be in prescribed format. The Certificate must be issued on/after 01.04.2022 but not later than the closing date of the application for Assistant Provident Fund Commissioner in the Employees' Provident Fund Organization (EPFO), 2023 [i.e. 17.03.2023]. Candidates should also note that the name of their caste (including its spellings) as indicated in their certificates, should be exactly the same as published in the lists notified by the Central Government from time to time. A certificate containing any variation in the caste name will not be accepted.**

**Note 4:** The OBC/SC/ST claim of a candidate will be determined in relation to the State (or part of the State) to which his father originally belongs. A candidate who has migrated from one State (or part of the State) to another should, therefore, produce an OBC certificate which should have been issued to him based on his father's OBC/SC/ST certificate from the State to which he (father) originally belongs.

**Note 5:** No change in the community status indicated by a candidate in his/her application form for the Assistant Provident Fund Commissioner in the Employees' Provident Fund Organization (EPFO), 2023 will be allowed by the Commission, except in the circumstances mentioned in the Rule 21 of the Rules for the examination.

6. A candidate must submit alongwith his/her application a **scanned** copy of the certificate showing his/her educational qualification prescribed in all the conditions and eligibility etc. as published in the Special Advertisement No. 51 - 2023 (Vacancy No. 23025102725) dated 25th Feb.2023. The certificate uploaded must be one issued by the authority (i.e. University or other examining body) awarding the particular qualification.

7. A candidate must **upload** with his/her **online Detailed Application Form** a **scanned** copy of certificate of age (including his/her date of birth). The date of birth accepted by the Commission is that entered in the Matriculation or Secondary School

Leaving Certificate or in a certificate recognised by an Indian University as equivalent to Matriculation or in an extract from a Register of Matriculates maintained by a University which must be certified by the proper authority of the University. A candidate who has passed the Higher Secondary Examination or an equivalent Examination may submit **a scanned** copy of the Higher Secondary Examination certificate or an equivalent certificate.

No other document relating to age like horoscopes, affidavits, birth extracts from Municipal Corporation, Service Records and the like, will be accepted.

The expression Matriculation/Higher Secondary Examination certificate in this part of the instruction includes the alternative certificate mentioned above.

Sometimes the Matriculation/Higher Secondary Examination Certificate does not show the date of birth or only shows the age by completed years or completed years and months. In such cases, a candidate must send in addition to the Matriculation/Higher Secondary Examination certificate **a scanned** copy of the certificate from the Headmaster/Principal of the Institution from where he/she passed the Matriculation/Higher Secondary Examination, showing date of his/her birth or his/her exact age as recorded in the Admission Register of the Institution.

Candidates are warned that unless complete proof of age as laid down in these instructions is sent with the application, the candidature of the candidate will be rejected.

**Note 1 :** A CANDIDATE WHO HOLDS A COMPLETED SECONDARY SCHOOL CERTIFICATE NEED SUBMIT **A SCANNED** COPY OF THE PAGE CONTAINING ENTRIES RELATING TO AGE ONLY.

**Note 2 :** CANDIDATES SHOULD NOTE THAT ONLY THE DATE OF BIRTH AS RECORDED IN THE MATRICULATION / HIGHER SECONDARY EXAMINATION CERTIFICATE OR AN EQUIVALENT CERTIFICATE ON THE DATE OF SUBMISSION OF APPLICATION WILL BE ACCEPTED BY THE COMMISSION AND NO SUBSEQUENT REQUEST FOR ITS CHANGE WILL BE CONSIDERED OR GRANTED.

8. (i) A candidate disabled while in the Defence Services claiming age concession should upload a **scanned** copy of the certificate in the form **given in Appendix-II** from the Director General Resettlement, Ministry of Defence to show that he was disabled while in the Defence Services in operations during hostilities with any foreign country or in a disturbed area and released as a consequence thereof.

(ii) Ex-servicemen including the Commissioned Officers and ECOs/SSCOs claiming age concession should produce **a scanned** copy of the certificate as applicable to them, in the form **given in Appendix-III** from the authorities concerned.

(iii) A candidate who has claimed age relaxation and/or fee exemption on account of his being Persons with Benchmark Disability must submit a scanned copy of the certificate issued by a Medical Board duly constituted by the Central/State Government in the format given in **Appendix-IV** .

9. Persons in Government service whether in a permanent or temporary capacity or as work charged employees other than casual or daily rated employees or those serving under Public Enterprises are required to **upload** an undertaking (as in the **Declaration in the Detailed Application Form**) that they have informed in writing their Head of Office/Department that they have applied for the Examination. Candidates should note that in case a communication is received from their employer by the Commission withholding permission to the candidates applying for/appearing at the Examination, their applications will be liable to be rejected/candidature will be liable to be cancelled. **(Please refer the conditions**

**and eligibility etc. for Assistant Provident Fund Commissioner in the Employees' Provident Fund Organization (EPFO), 2023).**

**The form of the Undertaking to be uploaded by the candidate.**

**UNDERTAKING (for Government Employees)**

I have intimated my Head of Office/Department in writing on \_\_\_\_\_ that I have applied for the **Assistant Provident Fund Commissioner in the Employees' Provident Fund Organization (EPFO), 2023.**

(Signature)

Name: \_\_\_\_\_

Roll No. \_\_\_\_\_

NOTE: All candidates in Government Service, whether in a permanent or in temporary capacity or as work charged employee, other than casual or daily rated employees or those serving under Public Enterprises will be required to submit an undertaking that they have informed in writing their Head of Office/Department that they have applied for the Examination. Candidates should note that in case a communication is received from their employer by the Commission withholding permission to the candidates applying for appearing at the examination, their applications will be liable to be rejected/candidature will be liable to be cancelled.

## Appendix-I

### **A. The form of certificate to be produced by Scheduled Castes and Scheduled Tribes candidates applying for appointment to posts under the Government of India.**

This is to certify that  
Shri/Shrimati/Kumari\*..... son/daughter\* of  
Shri ..... of village/town\*..... in  
District/Division\* ..... of the State/Union Territory\* .....  
belongs to the ..... caste/tribe\* which is recognised as a Scheduled  
Caste/Scheduled Tribe\* 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 List (Modification) Order, 1956; the Bombay Reorganisation Act, 1960; the Punjab Reorganisation Act, 1966; the State of Himachal Pradesh Act, 1970; the North Eastern Areas (Reorganisation) Act, 1971 and the Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976. the State of Mizoram Act, 1986, the State of Arunachal Pradesh Act, 1986 and the Goa, Daman & Diu (Reorganisation) Act, 1987.]

the Constitution (Jammu and 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 (Uttar Pradesh) Scheduled Tribes Order, 1967.@

the Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968.@

the Constitution (Goa, Daman and 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) Order (Amendment) Act, 1990.@

the Constitution (ST) Order (Amendment) Act, 1991.@

the Constitution (ST) Order (Second Amendment) Act, 1991.@

the Constitution (Scheduled Castes) Order (Amendment) Act, 2002@

the Constitution (Scheduled Castes and Scheduled Tribes) Order (Amendment) Act, 2002@

the Constitution (Scheduled Castes) Order (Second Amendment) Act, 2002@

%2. Applicable in the case of Scheduled Caste/Scheduled Tribe persons who have migrated from one State/Union Territory Administration to another.

This certificate is issued on the basis of the Scheduled Caste/Scheduled Tribe\* certificate issued to Shri/Shrimati\* ..... Father/Mother of Shri/Shrimati/Kumari\* ..... of village town\* ..... in District Division\*..... of the State/Union Territory\*..... who belongs to the ..... caste/tribe\*which is recognised as a Scheduled Caste/Scheduled Tribe\* in the State/Union Territory\* of ..... 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)  
State/Union Territory\*

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 Scheduled Caste/Scheduled Tribe/OBC Certificates.

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

**(B) The form of certificate to be produced by Other Backward Classes candidates applying for appointment to posts under the Government of India.**

This is to certify that Shri/Shrimati/Kumari\*..... son/daughter\* of ..... village/town\* ..... in District/Division\*..... of the State/Union Territory\*..... belongs to the ..... Community which is recognised as a backward class under :

@Government of India, Ministry of Welfare Resolution No.12011/68/93-BCC(C) dated 10th September, 1993 published in the Gazette of India, Extraordinary Part-I, Section-1, No.186 dated the 13th September, 1993.

@Government of India, Ministry of Welfare Resolution No.12011/9/94-BCC dated 19-10-94, published in the Gazette of India Extraordinary Part-I, Section-1, No.163 dated 20-10-1994.

@Government of India, Ministry of Welfare Resolution No.12011/7/95-BCC dated 24-5-95, published in the Gazette of India Extraordinary Part-I, Section-1, No.88 dated 25-5-1995.

@Government of India, Ministry of Welfare Resolution No.12011/96/94-BCC dated 9th March, 1996 published in the Gazette of India Extraordinary Part-I, Section-1, No.60 dated 11th March, 1996.

@Government of India, Ministry of Welfare Resolution No.12011/44/96-BCC dated 6th December, 1996 published in the Gazette of India Extraordinary Part-I, Section-1, No.210 dated 11-12-1996.

@Government of India, Ministry of Welfare Resolution No.12011/99/94-BCC dated the 11th December, 1997 published in the Gazette of India Extraordinary Part-I, Section-1, No.236 dated the 12th December, 1997.

@Government of India, Ministry of Welfare Resolution No. 12011/13/97-BCC dated the 3rd December, 1997 published in the Gazette of India Extraordinary, Part-I, Section-1, No. 239 dated the 17th December, 1997.

@Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/68/98-BCC dated the 27th October, 1999 published in the Gazette of India Extraordinary Part-I, Section-1, No. 241 dated the 27th October, 1999.

@Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/88/98-BCC dated the 6th December, 1999 published in the Gazette of India Extraordinary Part-I, Section-1, No. 270 dated the 6th December, 1999.

@Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/36/99-BCC dated 4th April, 2000 published in the Gazette of India Extraordinary Part-I, Section-1, No. 71 dated the 4th April, 2000.

@Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/44/99-BCC dated the 21st September, 2000 published in the Gazette of India Extraordinary Part-I, Section-1, No. 210 dated the 21st September, 2000.

@Government of India, Ministry of Social Justice and Empowerment Resolution No.12015/9/2000-BCC dated the 6th September, 2001 published in the Gazette of India Extraordinary Part-I, Section-1, No. 246 dated the 6th September, 2001.

@Government of India, Ministry of Social Justice and Empowerment Resolution No. 12011/1/2001-BCC dated 19th June, 2003 published in the Gazette of India Extraordinary Part-I, Section-1, No.151 dated the 20th June, 2003.

@Government of India, Ministry of Social Justice and Empowerment Resolution No. 12011/4/2002-BCC dated 13th January, 2004 published in the Gazette of India Extraordinary Part-I, Section-1, No. 9 dated the 13th January, 2004.

@Government of India, Ministry of Social Justice and Empowerment Resolution No. 12011/9/2004-BCC dated 16th January, 2006 published in the Gazette of India Extraordinary Part-I, Section-1, No. 10 dated the 16th January, 2006.

@Government of India, Ministry of Social Justice and Empowerment Resolution No. 12011/14/2004-BCC dated 12th March, 2007 published in the Gazette of India Extraordinary Part-I, Section-1, No. 67 dated the 12th March, 2007.

@Government of India, Ministry of Social Justice and Empowerment Resolution No. 12015/2/2007-BCC dated 18th August, 2010 published in the Gazette of India Extraordinary Part-I, Section-1, No. 232 dated the 18th August, 2010.

@Government of India, Ministry of Social Justice and Empowerment Resolution No. 12015/2/2007-BCC dated 11th October, 2010 published in the Gazette of India Extraordinary Part-I, Section-1, No.274 dated the 12th October, 2010.

@Government of India, Ministry of Social Justice and Empowerment Resolution No. 12015/15/2008-BCC dated 16th June, 2011 published in the Gazette of India Extraordinary Part-I, Section-1, No.123 dated the 16th June, 2011.

@Government of India, Ministry of Social Justice and Empowerment Resolution No. 12015/13/2010-BC-II dated 8th December, 2011 published in the Gazette of India Extraordinary Part-I, Section-1, No. 257 dated the 8th December, 2011.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.12015/05/2011-BC-II dated the 17th February, 2014 published in the Gazette of India Extraordinary Part-I, Section-1, No.41 dated the 17th February, 2014.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/04/2014-BC-II dated the 14<sup>th</sup> January, 2015 published in the Gazette of India Extraordinary Part-I, Section-1, No.16 dated the 14<sup>th</sup> January, 2015.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/07/2014-BC-II dated the 23<sup>rd</sup> January, 2015 published in the Gazette of India Extraordinary Part-I, Section-1, No.26 dated the 23<sup>rd</sup> January, 2015.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/01/2015-BC-II dated the 27<sup>th</sup> May, 2015 published in the Gazette of India Extraordinary Part-I, Section-1, No.144 dated the 27<sup>th</sup> May, 2015.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.12015/05/2011-BC-II dated the 14<sup>th</sup> July, 2015 published in the Gazette of India Extraordinary Part-I, Section-1, No.191 dated the 15<sup>th</sup> July, 2015.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/06/2014-BC-II dated the 09<sup>th</sup> September, 2015 published in the Gazette of India Extraordinary Part-I, Section-1, No.234 dated the 09<sup>th</sup> September, 2015.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/13/2016-BC-II dated the 25<sup>th</sup> May, 2016 published in the Gazette of India Extraordinary Part-I, Section-1, No.160 dated the 26<sup>th</sup> May, 2016.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/14/2016-BC-II dated the 13<sup>th</sup> June, 2016 published in the Gazette of India Extraordinary Part-I, Section-1, No.188 dated the 15<sup>th</sup> June, 2016.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/15/2016-BC-II dated the 30<sup>th</sup> June, 2016 published in the Gazette of India Extraordinary Part-I, Section-1, No.206 dated the 30<sup>th</sup> June, 2016.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No. 12011/04/2014-BC-II dated the 11<sup>th</sup> August, 2016 published in the Gazette of India Extraordinary Part-I, Section-1, No.266 dated the 11<sup>th</sup> August, 2016.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/06/2014-BC-II dated the 06<sup>th</sup> December, 2016 published in the Gazette of India Extraordinary Part-I, Section-1, No.363 dated the 07<sup>th</sup> December, 2016.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/13/2016-BC-II dated the 22<sup>nd</sup> December, 2016 published in the Gazette of India Extraordinary Part-I, Section-1, No.374 dated the 22<sup>nd</sup> December, 2016.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.20012/01/2017-BC-II dated the 18<sup>th</sup> January, 2017 published in the Gazette of India Extraordinary Part-I, Section-1, No.18 dated the 19<sup>th</sup> January, 2017.

@ Government of India, Ministry of Social Justice and Empowerment Resolution No.12011/7/2017-BC-II dated the 28<sup>th</sup> July, 2017 published in the Gazette of India Extraordinary Part-I, Section-1, No.188 dated the 31<sup>st</sup> July, 2017.

Shri/Shrimati/Kumari\*..... and/or\* his/her\* family ordinarily reside(s) in village/town\*..... of District/Division\* of the ..... State/Union Territory\* of ..... 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, O.M. No. 36033/3/2004-Estt.(Res.) dated 9th March, 2004 and O.M. No. 36033/3/2004-Estt.(Res.) dated 14th October, 2008 and O.M.No.36033/1/2013-Estt. (Res.) dated 27th May, 2013.

Signature.....  
\*\*Designation.....  
(with seal of office) State/U.T.\*

Place.....  
Date.....



**(B-1) The format of undertaking to be furnished along with the Detailed Application Form by Other Backward Class candidates applying for appointment to posts under the Government of India.**

**UNDERTAKING**

I ..... son/daughter of Shri  
..... resident of Village/Town/City .....  
District ..... State/UT ..... hereby declare that I belong to the  
..... community which is recognized as a backward class by the  
Government of India for the purpose of reservation in services as per orders  
contained in Department of Personnel & Training Office Memorandum  
No.36012/22/93-Estt(SCT) dated 08.09.1993. It is also declared that I do not belong  
to persons/sections (Creamy Layer) mentioned in Column 3 of the Schedule to the  
above referred Office Memorandum dated 08.09.1993 and O.M. No.36033/3/2004-  
Estt. (Res.) dated 9.3.2004 and 14.10.2008 and O.M.No.36033/1/2013-Estt. (Res.)  
dated 27th May, 2013 as amended from time to time.

Signature .....

Name of the Candidate .....

Roll No .....

**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.

\*Please delete the words which are not applicable.

\*\*Authorities empowered to issue Other Backward Classes certificate will be the same as those empowered to issue Scheduled Castes/Scheduled Tribes certificates.

@Strike out whichever is not applicable.

**Note 1 :** Candidates claiming to belong to OBCs should note that the name of their caste (including its spellings) as indicated in their certificates, should be exactly the same as published in the lists notified by the Central Government from time to time. A certificate containing any variation in the caste name will not be accepted.

**Note 2 :** The OBC claim of a candidate will be determined in relation to the State (or part of the State) to which his/her father originally belongs. A candidate who has migrated from one State (or part of the State) to another should, therefore, produce an OBC certificate which should have been issued to him/her based on his/her father’s OBC certificate from the State to which he (father) originally belongs.

**Note 3 :** No change in the community status already indicated by a candidate in his/her simplified application form for this examination will ordinarily be allowed by the Commission.

**(C) FORM OF CERTIFICATE TO BE PRODUCED BY EWS CANDIDATES**

Government of.....

(Name & Address of the authority issuing the certificate)

INCOME & ASSEST CERTIFICATE TO BE PRODUCED  
BY ECONOMICALLY WEAKER SECTIONS

Certificate No.....

Date:.....

VALID FOR THE YEAR **2022-23**

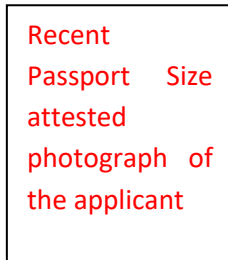
This is to certify that Shri/Smt./Kumari .....  
son/daughter/wife of ..... permanent resident of,  
..... Village/Street, ..... Post Office,  
.....District..... in the State/Union Territory.....  
Pin Code.....whose photograph is attested below belongs to Economically

Weaker Sections, since the gross annual income\* of his/her family\*\* is below Rs. 8 lakh (Rupees Eight Lakh only) for the financial year 2021-2022 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 (Central List).

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.

### **Appendix-II**

The form of certificate to be produced by the disabled Defence Services Personnel is :—

Certified that Rank No. .... Shri  
..... of Unit ..... was  
disabled while in the Defence Services in operations during hostilities with a foreign  
country/in a disturbed area\* and was released as a result of such disability.

Signature.....  
Designation.....  
Date.....

\*Strike out whichever is not applicable.

**Appendix-III**

**(A) Form of certificate applicable for Released/Retired personnel.**

It is certified that No..... Rank ..... Name ..... whose date of birth is ..... has rendered service from ..... to ..... in Army/Navy/Air Force and he fulfils ONE of the following conditions—

- (a) Has rendered five or more years military service and has been released on completion of assignment otherwise than by way of dismissal or discharge on account of misconduct or inefficiency.
- (b) Has been released on account of physical disability attributable to military service or on invalidment on .....

Station : .....  
Date : .....

Name and Designation of the  
Competent Authority  
SEAL

**(B) Form of certificate applicable for serving personnel (Applicable for serving personnel who are due to be released within one year).**

I hereby certify that, according to the information available with me No. .... Rank ..... Name ..... is serving in the Army/Navy/Air Force from ..... and is due to complete the specified term of his engagement with the Armed Forces on the date .....

Place : .....  
Date : .....

Signature of commanding Officer

Office Seal

Candidates furnishing certificate B as above will have to give the following undertaking :—

**UNDERTAKING TO BE GIVEN BY THE CANDIDATE:**

I understand that, if selected on the basis of the Recruitment/Examination to which this application relates, my appointment will be subject to my producing documentary evidence to the satisfaction of the appointing authority that I have been duly released/retired/discharged from the Armed Forces and that I am entitled to the benefits admissible to Ex-Servicemen in terms of the Ex-Servicemen (Re-employment in Central Civil Service and Posts) Rules, 1979, as amended from time to time.

Signature of Candidate

Station : .....  
Date : .....

**(C) Form of Certificate applicable for serving ECOs/SSCOs who have already completed their initial assignment and are on extended assignment.**

It is certified that No. .... Rank ..... Name ..... whose date of birth is ..... is serving in the Army/Navy/Air Force from .....

- 2. He/She has already completed his/her initial assignment of five years on ..... and is on extended assignment till .....

3. There is no objection to his/her applying for civil employment and he/she will be released on three months' notice on selection from the date of receipt of offer of appointment.

Name and Designation of the  
Competent Authority  
SEAL

Station : .....

Date : .....

Authorities who are competent to issue certificate are as follows :—

- (a) *In case of Commissioned Officers including ECOs/SSCOs.*  
Army—Military Secretary Branch, Army Hqrs., New Delhi.  
Navy—Directorate of Personnel, Naval Hqrs., New Delhi.  
Air Force—Directorate of Personnel Officers, Air Hqrs., New Delhi.
- (b) *In case of JCO/ORs and equivalent of the Navy and Air Force.*  
Army—By various Regimental Record Officers.  
Navy—BABS, Bombay.  
Air Force—Air Force Records NERW, New Delhi.

**10.** A candidate claiming to belong to Persons with Benchmark Disability category shall be required to meet one or more of the physical requirement/abilities, as laid down in Appendix IV of the Rules for the **Assistant Provident Fund Commissioner in the Employees' Provident Fund Organization (EPFO), 2023**. He/she must upload a scanned copy of the Certificate of Disability in Form V / Form VI/Form VII issued by notified Medical Authority of the Central/State Government.

**NOTWITHSTANDING THE AFORESAID PROVISION FOR AGE RELAXATION, A CANDIDATE BELONGING TO PERSONS WITH BENCHMARK CATEGORY WILL BE CONSIDERED TO BE ELIGIBLE FOR APPOINTMENT ONLY IF HE/SHE (AFTER SUCH PHYSICAL EXAMINATION AS THE GOVERNMENT OR THE APPOINTING AUTHORITY, AS THE CASE MAY BE, MAY PRESCRIBE) IS FOUND TO SATISFY THE REQUIREMENTS OF PHYSICAL AND MEDICAL STANDARDS FOR THE ASSISTANT PROVIDENT FUND COMMISSIONER IN THE EMPLOYEES' PROVIDENT FUND ORGANIZATION (EPFO).**

**Appendix- IV**

**Form-IV**  
**APPLICATION FOR OBTAINING DISABILITY CERTIFICATE BY PERSONS WITH**  
**BENCHMARK DISABILITIES**

1. Name .....  
(Surname) (First name) (Middle name)
2. Father's Name ..... Mother's Name .....
3. Date of Birth ..... /...../.....  
Date Month Year
4. Age at the time of application : ..... Year
5. Sex Male / Female
6. Address :  
(a) Permanent address (b) Current address (i.e. for communication)  
.....  
.....  
.....  
.....
- (c) Period since when residing at current address.....
7. Educational status (Pl. tick as application)  
(i) Post Graduate  
(ii) Graduate  
(iii) Diploma  
(iv) Higher Secondary  
(v) High School  
(vi) Middle  
(vii) Primary  
(viii) Illiterate
8. Occupation .....
9. Identification mark : (i) ..... (ii) .....
10. Nature of disability : Locomotor/hearing/visual/mental/others
11. Period since when disabled : From Birth/Since year .....
12. (i) Did you ever apply for issue of a disability certificate in the past .....  
YES/NO  
(ii) If yes, details :  
(a) Authority to whom and district in which applied  
.....

(b) Result of application .....

13. Have you ever been issued a disability certificate in the past? If yes, please enclose a true copy.

**Declaration :** I hereby declare that all particulars stated above are true to the best of my knowledge and belief, and no material information has been concealed or misstated. I further state that if any inaccuracy is detected in the application, I shall be liable to forfeiture of any benefits derived and other action as per law.

.....  
(Signature or left thumb impression of  
Person benchmark with disability,  
or of his/her legal  
guardian in case of persons with mental  
retardation, autism, cerebral

palsy and multiple disabilities)

Dated :

Place :

**Encl :**

1. Proof of residence (Please tick as applicable)
  - (a) ration card,
  - (b) voter identity card,
  - (c) driving license,
  - (d) bank passbook
  - (e) PAN card,
  - (f) passport,
  - (g) telephone, electricity, water and any other utility bill indicating the address of the applicant,
  - (h) a certificate of residence issued by a Panchayat, municipality, cantonment board, any gazetted officer or the concerned Patwari or Head Master of a Govt. school,
  - (i) in case an inmate of a residential institution for persons with disabilities, destitute, mentally ill, etc., a certificate of residence from the head of such institution.

2. Two recent passport size photographs

-----  
-----

(For office use only)

Date:  
authority  
Place:

Signature of issuing

Stamp

**Form-V**

**Certificate of Disability**

(In cases of amputation or complete permanent paralysis of limbs or dwarfism and in case of blindness)

[See rule 18(1)]

(Name and Address of the Medical Authority issuing the Certificate)

Recent passport 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:

(A) he/she is a case of:

- locomotor disability
- dwarfism
- blindness

(Please tick as applicable)

(B) the diagnosis in his/her case is \_\_\_\_\_

(C) he/she has \_\_\_\_\_ % (in figure) \_\_\_\_\_ percent (in words) permanent locomotor disability/dwarfism/blindness in relation to his/her \_\_\_\_\_ (part of body) as per guidelines ( .....number and date of issue of the 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 certificate of disability is issued

**Form - VI**

Certificate of Disability  
(In cases of multiple disabilities)  
[See rule 18(1)]

(Name and Address of the Medical Authority issuing the Certificate)

Recent passport size photograph (Showing face only) of the person with disability.
--

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

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

This is to certify that we 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:

(A) he/she is a case of Multiple Disability. His/her extent of permanent physical impairment/disability has been evaluated as per guidelines (.....number and date of issue of the guidelines to be specified) for the disabilities ticked below, 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.	Muscular Dystrophy			
3.	Leprosy cured			
4.	Dwarfism			
5.	Cerebral Palsy			
6.	Acid attack Victim			
7.	Low vision	#		
8.	Blindness	#		
9.	Deaf	£		
10.	Hard of Hearing	£		
11.	Speech and Language disability			
12.	Intellectual Disability			
13.	Specific Learning Disability			
14.	Autism Spectrum Disorder			
15.	Mental illness			
16.	Chronic Neurological Conditions			
17.	Multiple sclerosis			
18.	Parkinson's disease			
19.	Haemophilia			
20.	Thalassemia			
21.	Sickle Cell disease			

(B) In the light of the above, his/her over all permanent physical impairment as per guidelines (.....number and date of issue of the guidelines to be specified), is as follows : -



In figures : - ----- percent

In words :- ----- percent

2. This condition is progressive/non-progressive/likely to improve/not likely to improve.

3. Reassessment of disability is :

(i) not necessary,  
or

(ii) is recommended/after ..... years ..... months, and therefore this certificate shall be valid till -----

(DD) (MM) (YY)

@ e.g. Left/right/both arms/legs

# e.g. Single eye

£ 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

5. Signature and seal of the Medical Authority.

Name and Seal of Member	Name and Seal of Member	Name and Seal of the Chairperson

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

**Form - VII**

Certificate of Disability

(In cases other than those mentioned in Forms V and VI)

(Name and Address of the Medical Authority issuing the Certificate)

(See rule 18(1))

Recent passport 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 (.....number and date of issue of the guidelines to be specified) and is shown against the relevant disability in the table below:-

S. No	Disability	Affected part of	Diagnosis	Permanent physical impairment/mental

		body		disability (in %)
1.	Locomotor disability	@		
2.	Muscular Dystrophy			
3.	Leprosy cured			
4.	Cerebral Palsy			
5.	Acid attack Victim			
6.	Low vision	#		
7.	Deaf	€		
8.	Hard of Hearing	€		
9.	Speech and Language disability			
10.	Intellectual Disability			
11.	Specific Learning Disability			
12.	Autism Spectrum Disorder			
13.	Mental illness			
14.	Chronic Neurological Conditions			
15.	Multiple sclerosis			
16.	Parkinson's disease			
17.	Haemophilia			
18.	Thalassemia			
19.	Sickle Cell disease			

(Please strike out the disabilities which are not applicable)

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

3. Reassessment of disability is:

(i) not necessary, or

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

@ - eg. Left/Right/both arms/legs

# - eg. Single eye/both eyes

€ - eg. 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  
Chief Medical Officer/Medical Superintendent/  
Head of Government Hospital, in case the  
Certificate is issued by a medical authority who is  
not a Government servant (with seal)}

Signature/thumb impression of the person in whose favour certificate of disability 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 of the District

**FORM - VIII**

[Intimation of rejection of Application for Certificate of Disability]  
[See rule 18 (4)]

No. \_\_\_\_\_ Dated :

To,

(Name and address of applicant  
for Certificate of Disability)

Sub: Rejection of Application for Certificate of Disability

Sir/ Madam,

Please refer to your application dated\_\_\_\_\_ for issue of a Certificate of Disability for the following disability:

2. Pursuant to the above application, you have been examined by the undersigned/ Medical Authority on\_\_\_\_\_, and I regret to inform that, for the reasons mentioned below, it is not possible to issue a Certificate of Disability in your favour:

- (i)
- (ii)
- (iii)

3. In case you are aggrieved by the rejection of your application, you may represent to\_\_\_\_\_, requesting for review of this decision.

Yours faithfully,  
(Authorised Signatory of the notified Medical Authority)  
(Name and Seal)

11. The candidates should note that their candidature for the **Assistant Provident Fund Commissioner in the Employees' Provident Fund Organization (EPFO), 2023** will be purely provisional, subject to their satisfying the prescribed eligibility conditions. If on verification at any stage before or after the examination it is found that they do not fulfil any of the eligibility conditions, their candidature for the examination will be cancelled by the Commission.

*Originals of the above certificates are required to be produced at the time of interview.*

**NOTE:**—Candidates are required to sign the scanned copies of all certificates sent along with the printed copy of online application and also to put the date.

12. Any Detailed Application Form received without all or some of the documents will entail cancellation of candidature. Any missing documents sent subsequently by the candidate will not be entertained. The candidates must ensure that the scanned copies of online application form is properly filled in and is accompanied by all the relevant documents within the prescribed time. No column of the online application should be left blank.

13. In all communications with the Commission regarding his/her application, the candidate should mention the name of the Examination, his full name, Roll Number, Registration ID (11 digits) and date of birth.

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