

Government of Assam  
State Council for Technical Education (SCTE)  
Directorate of Technical Education, Assam  
Kahilipara, Guwahati-19



email: [sctedteassam@gmail.com](mailto:sctedteassam@gmail.com)

: 0361-4077528

No. TE(Ex) Admn-2/2024/ 352

Dated Guwahati, the 26/06/2024

**NOTICE**

This is for general information of the candidates belonging to OBC/MOBC (NCL), who have already done online registration for admission into the State Government Polytechnics of Assam for the session 2024-25.

The candidates from OBC/MOBC (NCL) have to fill up Annexure-I and submit the same with proper signature and seal of the concerned issuing authority to the Polytechnic where he/she has to take final admission.

In this regard, it is also mentioned that if a candidate fails to submit the Annexure-I at the time of final admission, his/her seat will be cancelled in any stage during the study period.

The Annexure-I is available in the website : <https://dte.assam.gov.in>

Director of Technical Education, Assam, &  
Secretary, State Council for Technical Education, Assam,  
Kahilipara, Guwahati-19.

ANNEXURE-I

**CERTIFICATE OF CASTE FOR THE CANDIDATES BELONGING TO OBC/MOBC CATEGORY  
[ NON CREAMY LAYER]**

**[ ALSO TO BE FILLED UP BY THE SUDENTS BELONGING TO TGLC,EX-TGLC, MORAN, MATAK, TAI-AHOM, KOCH-RAJBANSHI, CHUTIA COMMUNITY  
[NON CREAMY LAYER]**

Name of candidate : \_\_\_\_\_  
Name of father : \_\_\_\_\_  
Name of mother : \_\_\_\_\_  
Residential address : Village : \_\_\_\_\_  
P.O.: \_\_\_\_\_  
Sub-Division: \_\_\_\_\_  
District: \_\_\_\_\_  
Pin code : \_\_\_\_\_

Certified that the above named candidate/person belongs to Other Backward Classes/More Other Backward Classes and his/her Sub-Caste is \_\_\_\_\_ and community is \_\_\_\_\_

This is also certificate that the above named person falls under the category of Non Creamy Layer of OBC/MOBC.

This certificate is issued to the candidate after taking proper enquiry to his/her status as per prevailing rules of Assam and guidelines issue by Government of India from time to time.

Signature of the Identifying Authority \_\_\_\_\_

Full Name of the Identifying Authority \_\_\_\_\_

Countersigned by the DC/SDO of the concerned  
District/Sub-Division  
Full Name of the Certifying Officer \_\_\_\_\_

Date \_\_\_\_\_

(seal)

**INSTRUCTIONS:-**

1. Sub-Caste and /or Community in the certificate must be mentioned.
2. Certificate without signature of both the Authorities/Officers shall not be accepted.
3. Signature of any one of the following Identifying Authority is must.
  - (i) Chairman of Sub-Divisional Dev. Board for the Welfare of the Other Backward Classes within respective Sub-Division.
  - (ii) Member of All Assam State Advisory Council for the Welfare of the Other Backward Classes within the respective District to which the Member belongs.
  - (iii) President/Secretary of All Assam Other Backward Class Association within the jurisdiction concerned.
  - (iv) President/Secretary of District/Sub-Divisional Other Backward Classes Association with the respective jurisdiction.