



क्षेत्रीय कार्यालय: तेलंगाना/ Regional Office : Telangana

कर्मचारी राज्य बीमा निगम /Employees' State Insurance Corporation

5-9-23, हिल फोर्ट रोड, हैदराबाद/ 5-9-23, Hill Fort Road, Hyderabad-63.

दूरभाष/Phone: 040-23232356,57,58 Fax:040-23235048



**LIST OF CANDIDATES FINDING PLACE IN SELECT LIST FOR THE POST OF STENOGRAPHER FOR
ANDHRA PRADESH AND TELANGANA REGIONS**

Sl. No.	Application Reference No.	Roll Number	Name of the Candidate	Date of Birth	Category/Sub-category	Category against which finding place in Select List
1	4121560653	40460834100021	KAYALA GOPINADH	3/7/1992	OBC	OBC

Important Note:

1. While every care has been taken in preparing the result, ESI Corporation, however, reserves the right to rectify the errors/omissions, if any comes to its notice.
2. The selection of all the above candidates finding place in Select List is purely provisional subject of fulfilment of eligibility criteria with regard to age, essential qualification, category/sub-category etc. and verification of their identity, credentials, genuineness etc.

If at any stage it is found that the he/she is involved in any malpractices in the examination process, his/her selection/appointment shall be summarily cancelled and appropriated legal action shall be initiated against him/her.
3. The above candidates must ensure that they belong the respective category/sub category as mentioned in the above result.
4. Candidates belonging to OBC Category are required to submit OBC certificate in the prescribed proforma of Govt. of India appended below at Annexure - A and along with Form of Declaration appended below at Annexure - B.

Dated: 11/01/ 2018


(ARASADA KISHORE)
DEPUTY DIRECTOR (ADMN)
NAME & DESIGNATION OF
AUTHORIZED ESIC OFFICER

(FORMAT OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA)

This is to certify that Shri/Smt./Kumari _____ son/daughter of _____ of village/town _____ in District/Division _____ in the _____ State/Union Territory _____ belongs to the _____ Community which is recognized as a backward class under the Government of India, Ministry of Social Justice and Empowerment's Resolution No. _____ dated _____*. Shri/Smt./Kumari _____ and/or his/her family ordinarily reside(s) in the _____ District/Division of the _____ State/Union Territory. 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 OM No. 36012/22/93-Estt. (SCT,) dated 08.09.1993**.

Date _____

District Magistrate/ Deputy
Commissioner etc.

Seal of Office

*- The Authority issuing the Certificate may have to mention the details of Resolution of Government of India, in which the Caste of candidate is mentioned as OBC.

** - As amended from time to time.

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 Caste/Tribe Certificate Certificates:

i.	District Magistrate / Additional District Magistrate/ Collector/ Deputy Commissioner / Additional Deputy Commission/ Dy. Collector / 1 st Class Stipendiary Magistrate / Sub-Divisional Magistrate / Extra-Assistant Commissioner/ Taluka Magistrate / Executive Magistrate.
ii.	Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
iii.	Revenue Officers not below the rank of Tehsildar.
iv.	Sub-Divisional Officers of the area where the applicant and or his family normally resides.

Note-I a. The term 'Ordinarily' used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

b. The authorities competent to issue Caste Certificate are indicated below:-

- District Magistrate / Additional Magistrate / Collector / Dy. 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).
- Chief Presidency Magistrate / Additional Chief Presidency Magistrate/ Presidency Magistrate.
- Revenue Officer not below the rank of Tehsildar
- Sub-Divisional Officer of the area where the candidate and/or his family resides.

Note-II The closing date for receipt of application will be treated as the date of reckoning for OBC status of the candidate and also, for assuming that the candidate does not fall in the creamy layer.

Note-III The candidate should furnish the relevant OBC Certificate in the format prescribed for Central Government jobs as per Annexure 'A' above issued by the competent authority on or before the Closing Date as stipulated in this Notice.

Form of declaration to be submitted by the OBC candidate (in addition to the community certificate)

I Son/daughter of Shri.....resident of village/town/city..... district..... state.....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 and Training Office Memorandum No 36102/22/93-Estt. (SCT) dated 8-9-1993. It is also declared that I do not belong to persons/ sections/sections (Creamy Layer) mentioned in column 3 of the Schedule to the above referred Office Memorandum dated 8-9-1993, O.M. No. 36033/3/2004-Estt. (Res.) dated 9th March, 200, O.M. No. 36033/3/2004-Estt. (Res.) dated 14th October, 2008 and OM No. 36033/1/2013-Estt. (Res.), dated: 27th May, 2013.

Signature:.....

Full Name:.....

Address