



क.रा.बी.नि.
ESIC

कर्मचारी राज्य बीमा निगम
(श्रम ও রোজগার মন্ত্রক, ভারত সরকার)
कर्मचारी राज्य बीमा निगम
(श्रम एवं रोजगार मंत्रालय, भारत सरकार)
EMPLOYEES' STATE INSURANCE CORPORATION
(Ministry of Labour & Employment, Govt. of India)



सत्यमेव जयते

क.रा.बि.-स्ना. चि. वि. ও গবেষণাসংস্থান, ক.রা.বি.নি-চিকিৎসা মহাবিদ্যালয়
ডায়মন্ড হারবার রোড, জোকা, কোলকাতা- 700104
क. रा. बी. - स्ना. चि. वि. एवं अनुसंधान संस्थान, क. रा. बी. नि. आयुर्विज्ञान महाविद्यालय
डायमंड हार्बर रोड, जोका, कोलकाता- 700104
ESI- PGIMSR & ESIC Medical College, Joka
Diamond Harbour Road, Kolkata- 700104
फोन/Tel: (033) 2950 0731, ई मेल/Email: deanpgi-joka.wb@esic.nic.in
Website: www.esic.nic.in

412(Dean Joka)/Z/15/14/PGT-Misc/2013/Vol. III

Date- 19.11.2024

NOTICE FOR PG ADMISSION IN ESI-PGIMSR & ESIC MEDICAL COLLEGE JOKA, KOLKATA FOR THE ACADEMIC YEAR: 2024-25

1. All candidates are advised to go through the Information bulletin regarding PG admission 2024 uploaded on the MCC.NIC.IN & WBMCC.NIC.IN website.
2. Candidates have to report at Student Section, 2nd Floor, Academic block, ESIC Medical College, Joka, Kolkata for PG admission.
3. The admission process is likely to take more than one day. Outstation candidates are advised to make their own Lodging/Boarding arrangements accordingly.
4. Candidates must bring two plastic folders to submit their original documents.
5. Candidates must bring original documents along with minimum 2 sets photocopy of all required documents for admission.
6. If there is discrepancy in spelling of name and any other details, candidates must carry proof that the document belongs to the same person, in the form of an affidavit.
7. Candidates are also advised to keep soft copies of all their documents for future requirements.

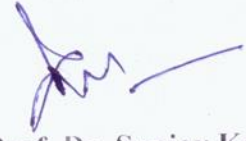
List of documents for STATE QUOTA [WEST BENGAL] Admission-

Sl. No.	Document list
1	Provisional Seat Allotment Letter issued by WBMCC – Essential document
2	NEET PG 2024 Admit Card issued by NBE – Essential document
3	NEET PG 2024 Rank Card issued by NBE - Essential document
4	Photocopy of Any Two Valid ID Card of Candidate (EPIC/Aadhar/Passport)- Essential document
5	Age Proof (Birth Certificate/Class X admit Card or Certificate) - Essential document
6	Any two of (EPIC/Aadhar/Passport) of Candidate / Any one of parents issued in the State of West Bengal (Only for Open-State Quota MBBS Passed From Outside West Bengal)
7	Relevant Domicile Certificate signed by appropriate authority (MBBS done outside WB only for Open State Quota)
8	MBBS Degree Certificate – [Except those who have completed MBBS in 2024] (In original) - Essential document
9	Mark sheet of MBBS 1 st , 2 nd , & 3 rd Professional (Part I & Part II)– (In original) - Essential document
10	Permanent Registration Certificate issued by Medical Council of India /State Medical Council. (In original) - Essential document
11	Internship Completion Certificate –[The candidate shall complete Internship by 15 th August, 2024 (In original)] - Essential document
12	Proof of previous degree or diploma (for those who have in possession / pursuing of PG Degree or Diploma Course) [If applicable and completed by 15.08.2024]
13	Proof of indemnity bond (or any other bond as applicable formalities completed by 31.07.2023 (for those who have in possession / pursuing of PG Degree or Diploma Course))
14	ID Card of Present employment and No Objection Certificate from present employer and Certificate from present employer stating 3 years of regular Service in the State of W.B along with mention of present place of posting. Such letter must also clearly indicate whether the candidate would like to avail stipend from the admitted institute or would avail salary from his / her present employer during the PG training period. In case of stipend availed, the candidate has to sever like other open candidates the indemnity bond after the successful completion of the course. (for other Service Candidate in WB Except WBHS/WBMES/WBPHAS)
15	Candidate Profile Letter as Generated from counseling on WBMCC
16	Physically Challenged Certificate verified by IPGMER Kolkata
17	Declaration letter to the Dept. of Health and Family Welfare, Govt. of WB to the effect that incumbents for the in-service seats fulfil all the conditions / eligibility for service quota and trainee reserve (applicable for In-Service Candidate)
18	Certificate from the institute in-charge or custodian of the service book to the effect that incumbents for the in-service seats fulfil all the conditions/eligibility for service quota (the list of remote and difficult areas as per Dept. notification dated: 26.02.2020 and the service quota order as per dept notice dated: 05.09.2022 (applicable for In-Service Candidate))
19	Posting order and joining report for claiming in service category seats under Dept of Health and Family Welfare in WBHS/WBMES/WBPHAS (applicable for In-Service Candidate)
20	Undertaking that the candidate is not presently admitted anywhere through AIQ/SQ or DNB counselling held in 2024 or earlier
21	Online Seat Surrender Receipt / Release Order of Previous Institution (If applicable)
22	Caste certificate (issued by appropriate authority in WB) if applicable - Essential document: <ul style="list-style-type: none"> • SC/ ST Certificate • OBC A/B Certificate [If OBC candidate belonging to NCL have their OBC certificate issued before 01.04.2024, then they have to submit NCL certificate issued in proper format only , issued on or after 01.04.2024 by the OBC certificate issuing authority] • EWS Certificate [issued on or after 01.04.2024]
23	4 Passport size photographs

24	Tuition Fees: Rs.125000/- (1 st Instalment of Annual Tuition Fee) and Annual Caution Money Rs.5000/-								
	Demand Drafts drawn in favour of ESI FUND ACCOUNT NO. 2 , payable at KOLKATA .								
	<table border="0"> <tr> <td>Amount-</td> <td>DD No:</td> <td>Date:</td> <td>Bank-</td> </tr> <tr> <td>Amount-</td> <td>DD No:</td> <td>Date:</td> <td>Bank-</td> </tr> </table>	Amount-	DD No:	Date:	Bank-	Amount-	DD No:	Date:	Bank-
Amount-	DD No:	Date:	Bank-						
Amount-	DD No:	Date:	Bank-						
25	ESIC Service Bond of 2 years – Notarised Bond of Rs.10,00,000/- on non-judicial stamp paper of Rs.100/-								
26	Photo copy of ID proof of the surety in r/o Notarised Bond								
27	Declaration - cum - Undertaking for submitting documents after joining								

Kindly visit MCC Website for this institution with the ID- 700543

ESI-PGIMSR & ESIC Medical College, Joka, Kolkata help line Number: 033 – 29701947.



Prof. Dr. Sanjay Keshkar
Registrar Academic

अकादमिक पंजीयक / Registrar Academic,
क. ए. बी. - सा. चि. एवं अनु. क. रा. बी. नि. आ. म. तथा
ESI- PGIMSR & ESIC Medical College and
बी. नि. अस्पताल एवं प्र. री. के. (ए. बी.), जोंका, कोलकाता- 70
ESIC Hospital & ODC (EZ), Joka, Kolkata- 700104

1. MEDICAL CERTIFICATE FORMAT

2. SC/ST/OBC/EWS CERTIFICATE CENTRAL FORMAT

3. PWD CERTIFICATE FORMAT

4. BOND FORMAT

5. DOMICILE CERTIFICATE FORMAT (FOR STATE QUOTA)

Medical Certificate for NEET PG 2024 qualified candidates

Roll No.....

Application No

NEET PG 2024 combined merit rank

I, Dr have examined Sri/Smt

Son/daughter of , residing at

..... [Verified from Aadhar card/passport/voter card/school or college ID card], a candidate for admission into the Medical PG degree/ diploma colleges in West Bengal for 2024- 25 admission session and observed as follows:-

1. Personal mark of identification.....
2. Apparent age..... years
3. Any history of Pulmonary Tuberculosis yes/no (put tick to appropriate one)
4. Chest measurement:
 - a. Normal respirationcm
 - b. In Full inspirationcm
 - c. In Full expiration cm
5. Height cm
6. Weight..... Kg
7. BMI
8. Eye sight visual acuity:
 - a. Right eye
 - b. Left eye
 - c. Colour blindness present/absent (put tick to appropriate one)

9. Immunization status (whether up to date as per latest National Immunization Schedule)

10. General physique

11. Heart

12. Lungs

13. Abdominal viscera

14. Blood Group

15. Any neurological deficits

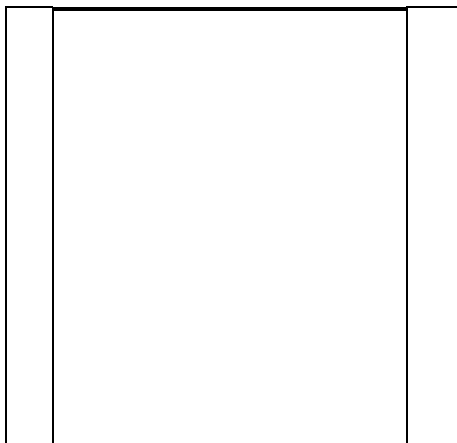
16. Any orthopedic disability

I do hereby certify that I cannot discover that he/she has any disease physical and or mental that makes him/her unsuitable to continue s t u d y i n g PG Medical c o u r s e .

I consider the above candidate FIT / UN FIT to join his/her Medical PG institution.

Date

Place



Signature of Registered Medical Practitioner

Registration No.....

Council of registration.....

Contact No

SEAL

(Candidate to paste recent passport Size photograph on which Medical practitioner has to attest)

PROFORMA FOR SCHEDULED CASTE AND SCHEDULED TRIBE CERTIFICATE

Form of certificate as prescribed in M.H.A., O.M., No. 42/21/49-N.G.S. dated the 28.1.1952, as revised in Dept. of Per- & A.R. letter No. 36012/6/76-Est. (S.CT), dated the 29.10.1977, to be produced by candidate belonging to a Scheduled Caste or a Scheduled Tribe in support of his/her claim.

CASTE CERTIFICATE

This is to certify that Shri/Smt./Kum.* ----- son/daughter* of ----- of village/town*-----in district/Division*-----of the State/Union Territory* ----- belongs to the ----- Caste/ Tribe which is recognized as a Scheduled Caste/Scheduled Tribe*under:

- The Constitution (Scheduled Caste) Order, 1950
- The Constitution (Scheduled Tribe) Order, 1950
- The Constitution (Scheduled Caste) (Union Territories) Order,1951
- The Constitution (Scheduled Tribe) (Union Territories) Order,1951

1. (as amended by the Scheduled Caste and Scheduled Tribe Lists (Modification) order, 1956, the Bombay Re-organization Act, 1960, the Punjab Re- organization Act, 1966, the State of Himachal Pradesh Act, 1970 the North Eastern Areas (Re-organization) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders, (Amendment) Act, 1976).

- The Constitution (Jammu and Kashmir) Scheduled Caste Order, 1956.
- The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959.
- The Constitution (Dadra and Nagar Haveli) Scheduled Caste Order, 1962.
- The Constitution (Dadra and Nagar Haveli) Scheduled Tribes, Order, 1962.
- The Constitution (Puducherry) Scheduled Caste Order, 1964
- The Constitution (Uttar Pradesh) Scheduled Tribes, Order, 1967.
- The Constitution (Goa, Daman & Diu) Scheduled Caste Order, 1968.
- The Constitution (Goa, Daman & Diu) Scheduled Tribes, Order, 1968.
- The Constitution (Nagaland) Scheduled Tribes Order, 1970.
- The Constitution (Sikkim) Scheduled Caste Order, 1978.
- The Constitution (Sikkim) Scheduled Tribes Order, 1978.

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

This certificate is issued on the basis of the Scheduled Caste/Scheduled Tribe* certificate issued to Shri/Smt*----- -father/mother of Shri/Smt/Kum* - ----- of village/town* ----- - in District/Division* -----of the State/Union Territory*----- who belongs to the -----caste/tribe which is recognized as a Scheduled Caste/Scheduled Tribe* in the State/Union Territory* -----issued by the ----- (name of prescribed authority) vide their No----- - date

3. Shri*/Smt.* /Kum* -----and/or his/her* family ordinary reside (s) in village/town* -----of the State/Union Territory of-----.

Signature _____

Place----- State/Union Territory

** Designation-----

Date----- (With seal of Office)

* Please delete the words which are not applicable.

- Please quote specific Presidential Order.
- Delete the paragraph which is not applicable.

** Should be signed by the Authorities empowered to issue Scheduled Caste/Scheduled Tribe certificates as specified above.

ANNEXURE-4

PROFORMA FOR OTHER BACKWARD CLASS (OBC-NCL) CERTIFICATE

(Certificate to be produced by Other Backward Class applying for admission to Central Educational Institute (CEIS) under the Government of India)

This is to certify that Shri/Smt./Kum./Dr. _____ Son/Daughter of Shri/Dr. _____ of Village/Town _____ District/Division _____ in the _____ State belongs to the _____ Community which is recognized as a backward class under:

- (i) Resolution No. 12011/68/93-BCC(C) dated 10/09/93 published in the Gazette of India Extraordinary part I Section I No. 186 dated 13/09/93.
- (ii) Resolution No. 12011/9/94-BCC dated 19/10/94 published in the Gazette of India Extraordinary part I Section I No. 163 dated 20/10/94.
- (iii) Resolution No. 12011/7/95-BCC dated 24/05/95 published in the Gazette of India Extraordinary part I Section I No. 88 dated 25/05/95.
- (iv) Resolution No. 12011/96/94-BCC dated 09/03/96.
- (v) Resolution No. 12011/44/96-BCC dated 06/12/96 published in the Gazette of India Extraordinary part I Section I No. 120 dated 11/12/96.
- (vi) Resolution No. 12011/13/97-BCC dated 03/12/97.
- (vii) Resolution No. 12011/99/94-BCC dated 11/12/97.
- (viii) Resolution No. 12011/68/98-BCC dated 27/10/99.
- (ix) Resolution No. 12011/88/98-BCC dated 06/12/99 published in the Gazette of India Extraordinary part I Section I No. 270 dated 06/12/99.
- (x) Resolution No. 12011/36/99-BCC dated 04/04/2000 published in the Gazette of India Extraordinary part I Section I No. 71 dated 04/04/2004.
- (xi) Resolution No. 12011/44/99-BCC dated 21/09/2000 published in the Gazette of India Extraordinary part I Section I No. 210 dated 21/09/2000.
- (xii) Resolution No. 12015/09/2000-BCC dated 06/09/2001.
- (xiii) Resolution No. 12011/01/2001-BCC dated 19/06/2003.
- (xiv) Resolution No. 12011/04/2002-BCC dated 13/01/2004.
- (xv) Resolution No. 12011/09/2004-BCC dated 16/01/2006 published in the Gazette of India Extraordinary part I Section I No. 210 dated 16/01/2006.
- (xvi) Resolution No. 20012/129/2009/-BC-II dated 04/03/2014 published in the Gazette of India Extraordinary Part I section I no. 63 dated 04/03/2014.
- (xvii) Resolution No. F.No.12015/05/2011-BC-II dated 17th February, 2014

Shri/Smt./Kum. _____ and/or his family ordinarily reside(s) in the _____ District/Division of _____ State.

This is also to certify that he/she does not belong to the persons/section (creamy layer) mentioned in Column 3 of the Scheduled to the Government of India. Department of Personnel & Training O.M. No. 36012/22/93-Estt. (SCT) dated 08/09/93 which is modified vide OM No. 36033/3/2004 Estt. (Res.) dated 09.03.2004 or the latest notification of the Government of India.

Dated:

District Magistrate/Competent Authority Seal

NOTE: Any Resolution Number not mentioned/ corrective Ness in above list (1-17) may be verified from central list at national commission for Backward classes website and be may accepted as valid after confirmation from site by verifying institutes.

- (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 Certificates are indicated below:**
 - Ⓐ **District Magistrate/Additional Magistrate/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.**
- (c) **The annual income/status of the parents of the applicant should be based on financial year ending March 31, 2024.**

Form 7 for EWS Certificate

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 _____

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 _____. 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 _____

Recent Passport size
attested photograph of
the applicant

*Note1: 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.

Annexure-2

CERTIFICATE OF DISABILITY FOR NEET ADMISSIONS

(As per MCI Gazette Notification No. MCI-18(1)/2018-Med./187262 dated 5th Feb, 2019/
14th May,2019 for admission to Medical Courses in All India Quota)

Certificate No : 2024-Aug/XXXX

Certificate Date : 00-XXX-2024

Name of the Designated Disability Certification Centre				PHOTOGRAPH
This to certify that Dr. / Mr. / Ms.				
Age		Son/ Daughter of Mr.		
NEET Roll No.		Rank No.		

Has the following Disability

Disability Details				
Sr No	Disability Type	Type of Disability	Specified Disability	Disability %
1				

Conclusion: Based on quantification of Disability The Disability of candidate is between 40- 80%. Hence, the candidate is eligible to pursue medical education and also eligible to claim PwD reservation.

The Disability Certification Board certifies that the candidate is Eligible for admission in Medical/ Dental courses and to avail 5% PwD reservation as per the NMC/ MCI Gazette Notification.

Eligible for PWD Quota, Eligible for Medical/Dental Course

Functional competency with the aid of **Assistive devices** in case of **Locomotor*/ Visual*/ Hearing* Impairment**, if any.
No

Sign & Name:
Name:

Assistant Professor
Neurology

Sign & Name:

Associate Professor
Orthopedics

Sign &

Associate Professor
Medicine

Disclaimer : This Certificate is Provisional and will be verified by the allotted college authorities at the time of admission. The candidate may be subjected to diagnostic test to specify the level of disability again at the allotted college in case of any ambiguity. The certificate may be cross verified by the admitting college from the Disability Board from where the certificate has been issued. Hence, the Designated Disability Boards and the candidates are advised to preserve the records for any future reference. The Disability Certificate is valid for this academic session only.

Downloading Date: August XX, 2024 00:0

QR CODE

**FORMAT OF BOND
(FOR PG [MD/MS]-MEDICAL STUDENTS)**

**(To be executed on Stamp Paper of value as applicable under Stamp Duty Act.
Duly Notarized)**

KNOW ALL MEN BY THESE PRESENTS THAT We (1)
Dr.(Mr./Mrs./Ms.) _____ **(herein-after called the Bounden)**
son/daughter/wife of _____ residing at
(Residential Address) and (2) Shri /
Smt. _____ **(hereinafter called 'the surety
/ sureties)** son/daughter/wife of _____
residing at (Here enter address) _____ do
hereby bind ourselves and each of us & our respective heirs, executors & administrators
jointly and severally to pay to the Employees' State Insurance Corporation (hereinafter
referred to as 'the Corporation') on demand the total amount of Rs 10, 00,000 (Rupees Ten
Lakh only) with interest @ 12% towards failure to fulfill the obligation/ for violation of the
condition here-in-after mentioned. The bounden and sureties shall furnish Bank
Guarantee** amounting to Rs 10,00,000 (Rupees Ten lakh only) in favour of the Dean of
the ESIC Institution in lieu of the total amount in phases (Rs. 5 lakh at the beginning of 2nd
academic year and Rs. 5 lakh at the beginning of 3rd academic year respectively) so that the
amount of bank guarantee furnished and the balance amount does not exceed the total
obligation amount (Rs. 10 lakh) at any stage. The original documents of the student trainee
would be retained by the Corporation pending the submission of Bank Guarantee.

Signed this Day ofin the year..... by the bounden
Dr.(Mr./Mrs./Ms.).....and surety / sureties Shri/Smt.....

Signature

In the presence of Witness*:

1. Signature
(Name & Address with official seal)

1. Signature of BOUNDEN
(Name & Address**; Photo IDNo.)

2. Signature
(Name & Address)

2. Signature of SURETY / SURETIES
(Name & Address**; Photo IDNo.)

**The provision of Bank Guarantee is subject to final outcome in various Writ Petitions
pending in the Hon'ble High Courts.



WHEREAS the Bounden Dr.(Mr./Mrs.) has been selected to undergo..... (here enter the name of the course of study) on the basis of merit Central/State/Stake Holder in ESIC Medical Education Institution (Name of the Institution) _____ for a period of _____(duration of Course).

AND WHEREAS the Corporation have agreed to incur the expenses on condition that after successful completion of the course of study the bounden shall serve any of the institution, of the Corporation or of ESI Scheme of the State Government, as the case may be, for a period of two years anywhere in India and also subject to the terms and conditions hereinafter appearing and the bounden and the surety / sureties have agreed to the same.

NOW the condition of the above written obligation is that in the event the Bounden discontinues the study or after completion of the MD/MS Course of study to which he/she was selected, fails to serve the Corporation for period of two years, the Corporation shall have the right to invoke the Bank Guarantee so furnished by the Bounden and sureties. In event of partial default, the amount payable to the Corporation would be based on the period of service rendered as mentioned hereunder :

Period of service rendered	Bond Amount payable in lieu
a) Less than 01 year	Full amount, i.e. Rs. 10 lakh
b) 01 year to less than 02 years	Rs. 5 lakh

The Corporation would invoke Bank Guarantee for an amount proportionate to the default.

The bond is legally binding on the bounden and the sureties. The above written obligation shall be void and of no effect in event of invocation of Bank Guarantee; otherwise this shall remain in full force and effect.

PROVIDED further that the bounden and the surety / sureties do hereby agree that all sums found due to the Corporation under or by virtue of this bond shall be recovered jointly and severally from them and their properties movable and immovable as if such dues were arrears of land revenue under the provisions of the Revenue Recovery Act for the time being in force or in such other manner as the Corporation may deem fit.



PROVIDED further that during the tenure of the course, the Bounden shall be paid emoluments in Level 10 (7th CPC) or as decided by the Corporation from time to time.

Provided further that it is not necessary for the Corporation to sue the bond holder before taking action on the surety / sureties, under this bond and the liabilities of the surety / sureties is co-extensive with that of the bounden and shall not be affected by the Corporation giving time or any other indigence to the bounden or by the Corporation varying of the terms and conditions herein contained.

Signed this Day ofin the year..... by the bounden Dr.(Mr./Mrs./Ms.)..... and surety / sureties Shri/Smt.....

Signature

In the presence of Witness*:

- | | |
|---|--|
| 1. Signature
(Name & Address with official seal) | 1. Signature of BOUNDEN
(Name & Address**; Photo IDNo.) |
| 2. Signature
(Name & Address) | 2. Signature of SURETY / SURETIES
(Name & Address**; Photo IDNo.) |

*Dean/Administrative Officer of ESIC Medical Education Institution will sign as witness.

**Proof of Residential Address of Bounden and Surety / sureties is to be obtained.



The types of domicile certificate proforma that are uploaded in the website <https://wbmcc.nic.in> are described herewith:-

Proforma a1: Residential/Domicile Certificate for candidates residing in the State of West Bengal continuously for at least last 10 years as on 31st December of 2023. Candidate must have passed class 10 or equivalent and class 12 or equivalent from the State of West Bengal.

Proforma b: Residential/Domicile Certificate for candidates NOT residing in the State of WB continuously for at least last 10 years as on 31.12.2023 [that is candidate have passed either class 10 or class 12 or both from outside West Bengal] but whose parent/s are permanent resident/s of West Bengal having their permanent home address within West Bengal and living continuously for at least last 10 years in West Bengal as on 31st December of 2023.

Domicile Certificate as applicable which is obtained from the West Bengal e-district portal (<https://edistrict.wb.gov.in/PACE>) will also be accepted as the proof of domicile.

In case proforma b or e-district domicile of the parent is furnished, it is required to produce any two of the following original ID proof (Voter ID card, Aadhar Card, and Passport) of the concerned parent during the stage of document verification where the said ID cards show that the residential address is in West Bengal.

Who are authorized to sign the domicile certificate:-

Proforma a1 or b must be signed and certified by any of the following competent authorities of State Govt. or Central Govt. having local jurisdiction of the place of permanent residence of the candidate or the parent as the case may be e.g.:-

1. District Magistrate, Additional District Magistrate, Deputy Magistrate, Deputy Collector, Sub Divisional Officer, Block Development Officer.
2. Superintendent of Police, Additional Superintendent of Police, Deputy Superintendent of Police, Sub Divisional Police Officer.
3. Commissioner, Additional Commissioner, Joint Commissioner, Deputy Commissioner and Assistant Commissioner of Police Commissionerate.
4. Judicial Magistrate of any rank or position in the concerned district or Metropolitan locality or Hon'ble High Court at Calcutta or Hon'ble Supreme Court of India.
5. Corporation area: Commissioner, Additional Commissioner, Joint Commissioner, Deputy Commissioner and Assistant Commissioner.
6. Assistant Secretary or above in the Secretariat of Govt. of West Bengal (including GTA) or Central Govt.
7. Deputy Director or above in the Directorate of Govt. of West Bengal or Central Govt.

Every official certifying the domicile status of candidate or parent must provide his/her FULL NAME, DESIGNATION, PLACE OF POSTING WITH ADDRESS, LANDLINE or MOBILE Number. He/she should also provide his/her identity card number if available.

Certification from any other authority other than those enumerated above will not be accepted.

Domicile certificate issued by the people's representative like Councilor of Municipal Corporation/Municipality, Member of three tier panchayet system or GTA, Member of Legislative Assembly or Member of Parliament are not accepted.

PROFORMA a1

Residential/Domicile Certificate for candidates residing in the State of West Bengal continuously for at least the last ten (10) years as of 31.12.2023

Certified that _____

Son/ daughter of _____ is a

resident/permanent resident of West Bengal at Village/House No. _____

Street _____ Post Office _____ Police Station _____

In the District _____ under _____ Assembly

Constituency and has been living in the State of West Bengal continuously/ uninterruptedly

at least for the last ten (10) years as of 31-12-2023.

Paste 4 cmx3 cm size recent colour photograph of the candidate in this box. Photo must be attested by the certifying authority

Candidate's signature

(Candidate's Photograph)

Candidate must sign here in front of the certifying authority

Signature of Certifying Authority _____

Full Name of Certifying Authority (Block letters) _____

Designation with Official Seal _____

Office Address _____

Office Phone No. _____ Mobile No: _____ (optional)

ID No: _____ (optional)

Note: Photographs are to be attested by the certifying authority. The Certifying Authority may preserve a duplicate copy of this Certificate as a record.

PROFORMA b

Residential/Domicile Certificate for candidates not residing in the State of West Bengal but whose parent(s) is (are) permanent resident(s) of West Bengal having their permanent home address within West Bengal

Certified that _____

Father/mother of _____ (the applicant) is a permanent Resident of West Bengal at Village/House No. /Street _____ Post Office _____ Police Station _____

In the District of _____ Under _____ Assembly Constituency

<p>Paste 4 cmx3 cm size recent colour photograph of the candidate in this box. Photo must be attested by the certifying authority</p>	<p>Paste 4 cmx3 cm size recent colour photograph of father/ mother of the candidate in this box. Photo must be attested by the certifying authority</p>
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(Candidate's Photograph)

(Father's/ Mother's Photograph)

Candidate's Signature

Father's/ Mother's Signature

Candidate must sign here in front of the certifying authority

Signature of Certifying Authority _____

Full Name of Certifying Authority (Block Letter) _____

Designation with Official Seal _____

Office Address _____

Office Phone No. _____ Mobile No: _____ (optional)

ID No: _____ (optional)

Note: Photographs are to be attested by the certifying authority. The Certifying Authority may preserve a duplicate copy of this Certificate as a record.