

HH. CERTIFICATE OF LOCATION OF EDUCATIONAL INSTITUTES
 (To be submitted by the candidates applying against **Backward Areas** and Merged Area Districts inner seats only)

Office of District Executive Officer (Education)
 District/Agency/FR: Certified that

Mr./Ms. _____ S/o,D/o _____ has been

studying in the District/Agency/FR of _____ as follows:

Class	Full Name of School/College	Location of School/College	INSIDE / OUTSIDE	Year (From-To)	Board
Class-1					
Class-2					
Class-3					
Class-4					
Class-5					
Class-6					
Class-7					
Class-8					
Class-9 (Attach separate DMC for 9 th class)					
Class-10 (Attach DMC for 10 th class)					
Class-11 (Attach separate DMC for 11 th class)					
Class-12 (Attach separate DMC for 12 th class)					

Signature of DEO (Education)
 with official stamp

Verified by the DC of concerned District/FR or PA of Agency

DC/PA _____
 With official stamp