

**APPLICATION FOR UNDERGOING TRAINING AS TRADE APPRENTICE UNDER THE APPRENTICES ACT 1961
IN RAIL WHEEL FACTORY**

Leaving any column blank in the application form will lead to rejection

1. Trade for which applied
(in capital letters)

2. Name of Candidate:
(in capital letters as mentioned in
Matriculation Certificate)

3. Father's Name/Mother's Name/Guardian's Name:
(in capital letters, as the case may be)

4. Date of Birth: (DD/MM/YY):

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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5. Community: (Tick):

SC	<input type="checkbox"/>	ST	<input type="checkbox"/>	OBC	<input type="checkbox"/>	UR	<input type="checkbox"/>	Ex Ser	<input type="checkbox"/>
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6. Are you physically Disabled/Challenged (Tick):

VH	<input type="checkbox"/>	HH	<input type="checkbox"/>	OH	<input type="checkbox"/>
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7. Address for communication (in capital letters):

State: Pin Code:

8. Nationality

9. Gender (Male/Female)

10. Mobile No.

11. E-Mail Address

12. Visible Marks of Identification:
(Moles etc on your body)

1.	<input type="text"/>
2.	<input type="text"/>

13. Educational Qualification:

Qualification	Board	Year of Passing	Total Marks	Marks Secured	Marks%
10 th Class/ Matriculation					

14. Technical Qualification:

Qualification	Trade	Board	Year of passing	Total Marks	Marks Secured	Marks%
ITI/NTC						

Note: Candidates are advised to fill marks secured in 10th Class and ITI correctly; any discrepancy will lead to rejection.

15. Details of IPO/Demand Draft enclosed with the application:

(Processing fee of ₹ 100/- to be paid in form of IPO/Demand Draft only)

Name of the post office/Bank	Serial Number	Date	Amount

Paste here (do not pin or staple) your recent colour passport size photo with signature (Two identical photos duly signed should be attached in separate cover to the application)

16. Are you seeking fees exemption? If any tick appropriate box for the grounds for seeking exemption:

SC	ST	Female	Person with Disability

17. List of Documents enclosed: (fill in the details of the copies of certificates/documents enclosed),

i)	iii)	v)
ii)	iv)	vi)

18. Whether Ward of Serving Railway Employee.

YES/NO.

If yes, whether the required certificate in the prescribed proforma (Annexure-D) is enclosed. YES/NO.

19. Whether Ex-Servicemen/ward of Servicemen.

YES/NO.

If so, whether discharged certificate enclosed.

YES/NO.

20.a.

Whether Registered with Employment Exchange located in the State of Karnataka	Yes : <input type="checkbox"/>	No: <input type="checkbox"/>
Registration Number		
Place of Employment Exchange in the State of Karnataka		
Date of last renewal of Employment Exchange Card in the State of Karnataka		

20.b.

Whether Registered with Local Employment Exchange located in the States other than Karnataka	Yes : <input type="checkbox"/>	No: <input type="checkbox"/>
Registration Number		
Place of Local Employment Exchange in the States other than Karnataka		
Date of last renewal of Local Employment Exchange located in the States other than Karnataka		

21. Declaration by the candidate:

I hereby declare that all the particulars given above by me are true to the best of my knowledge. I am aware that in the event of any information furnished by me is found false/incorrect at any stage, my candidature/Apprenticeship will be cancelled/terminated without any notice. I will abide by the instructions given in the notification. I also understand fully that the obligation under Apprentices Act, 1961 on the part of Railway is to provide me training only in the allotted trade and not to absorb/provide with employment in the Railway on completion of my training and thus I have no claim at all for employment and shall never make a claim for employment in the Railway on this account.

Signature of the candidate	Left hand thumb impression	Date :
		Place :

FORM OF CASTE CERTIFICATE FOR SC/ST

The format of the certificate to be produced by Scheduled Castes or Scheduled Tribes candidates applying for appointment to posts under the Government of India.

This is to certify that Shri /Shrimati/Kumari*
son/daughter* ofof Village / Town*in
District/Division*of 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. 1950
The Constitution (Scheduled Tribes) (Union Territories) Order, 1951
(As amended by the Scheduled Castes and Scheduled Tribes Lists (Modification) Order, 1956, the Bombay Re-organisation Act, 1960, the Punjab Re-organisation Act, 1966, the State of Himachal Pradesh Act, 1970 and the North Eastern Area (Re-organisation) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders,(Amendment) Act, 1976)
The Constitution (Jammu & 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 Orders, 1964@
The Constitution (Scheduled Tribes) (Uttar Pradesh) 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) orders (Amendment)Act,1990@
The Constitution (ST) orders (Amendment) Ordinance 1991@
The Constitution (ST) orders (Second Amendment) Act, 1991@
The Constitution (ST) orders (Amendment) Ordinance 1996.

% 2. Applicable in the case of Scheduled Castes, Scheduled Tribes persons who have migrated from one State/Union Territory Administration.

This certificate is issued on the basis of the Scheduled Castes/Scheduled tribes certificate issued to Shri/Shrimati
Father/mother of Shri/Srimati/Kumari*of village/town*
in District/ Division*of the State/Union Territory*who belong to the
Caste/Tribe which is recognized as a Scheduled Caste/Scheduled Tribe in the State/Union Territory* issued by the
dated

%3. Shri/Shrimati/Kumari *and / or his / her* family, reside(s) in village/town*
of*District/Division* of the State / Union Territory* of

Signature

**Designation

(with seal of Office)

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 Caste/Tribe Certificates:

- (i) District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Dy. Collector/ Ist 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 candidate and/or his family normally resides.

NOTE: ST candidates belonging to Tamil Nadu state should submit caste certificate ONLY FROM THE REVENUE DIVISIONAL OFFICER.

OBC CERTIFICATE FORM**FORMAT OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES
APPLYING FOR APPOINTMENT TO POST UNDER THE GOVERNMENT OF INDIA.**

This is to certify that Shri/Smt/Kum*

Son/Daughter* of Shri _____ of Village /Town _____

District _____ in _____ State belongs to _____ community

which is recognized as backward class under _____ : (indicate the Sub Caste)

1. Resolution No. 12011/68/93-BCC@dtd 10th September 1993, published in the Gazette of India- Extraordinary Part-I, Section I. No. 186 dated 13th September 1993.
2. Resolution No. 12011/9/94-BCC dated 19th October 1994, published in the Gazette of India-Extraordinary Part-I, Section I. No. 163, dated 20th October 1994.
3. Resolution No. 12011/7/95-BCC dtd 24th May 1995, Published in the Gazette of India-Extraordinary Part-I, Section I. No. 88 dated 25th May 1995.
4. Resolution No. 12011/44/96-BCC dtd 6th December 1996, published in the Gazette of India-Extraordinary Part-I, Section I. No. 210, dated 11th December 1996.
5. Resolution No. 12011/68/93-BCC, Published in Gazette of India - Extra Ordinary - No. 129, dated the 8th July 1997.
6. Resolution No. 12011/12/96-BCC, Published in Gazette of India - Extra Ordinary - No. 164 dated the 1st Sept. 1997.
7. Resolution No. 12011/99/94-BCC, Published in Gazette of India - Extra Ordinary - No. 236 dated the 11th Dec. 1997.
8. Resolution No. 12011/13/97-BCC, Published in Gazette of India - Extra Ordinary - No. 239 dated the 3rd Dec. 1997.
9. Resolution No. 12011/12/96-BCC, Published in Gazette of India - Extra Ordinary - No. 166 dated the 3rd August 1998.
10. Resolution No. 12011/68/93-BCC, Published in Gazette of India - Extra Ordinary - No. 171 dated the 6th August 1998.
11. Resolution No. 12011/88/98-BCC, Published in Gazette of India - Extra Ordinary - No. 241 dated the 27th Oct. 1999.
12. Resolution No. 12011/88/98-BCC, Published in Gazette of India - Extra Ordinary - No. 270 dated the 6th Dec. 1999.
13. Resolution No. 12011/36/99-BCC, Published in Gazette of India - Extra Ordinary - No. 71-dated the 4th April 2000.

Shri/Smt/Kum* _____ and / or his/her family ordinarily reside(s) in the
_____ District of the _____ State. 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 and Training O.M. No. 36012/22/93/Estt. (SCT) dated 08.09.1993) and modified vide Government of India, Department of Personnel and Training O.M. No. 36033/3/2004/Estt.(RES). dated 09.03.2004.

Place:

Date:

District Magistrate/
Dy. Commissioner etc
(with seal of office)

- a. The term ordinarily used here will have the same meaning as Section 20 of the representation of the People Act. 1950.
- b. Where the certificates are issued by Gazetted Officers of the Union Government or State Governments, they should be in the same form but countersigned by the District Magistrate or Dy. Commissioner (Certificates issued by Gazetted officers and attested by District Magistrate/Deputy Commissioner are not sufficient).
- c. The OBC certificate from the authorities only will be accepted
 1. District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector / Ist Class Stipendiary Magistrate/Extra-Assistant Commissioner (not below the rank of Ist Class stipendiary Magistrate) *Subdivisional Magistrate/Taluka Magistrate/Executive Magistrate.
 2. Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
 3. Revenue Officer not below the rank of Tahsildar, and
 4. Sub-Divisional officer of the area where the candidate and/or his family normally resides.

CERTIFICATE TO BE PRODUCED BY THE WARDS OF THE SERVING RAILWAY EMPLOYEES IN THE FOLLOWING FORM AND TO BE ATTACHED TO THE APPLICATION FORM

- 1) Name of the Serving Railway Employee :
- 2) Designation :
- 3) Ticket No./PF No./Staff No./Employee No. :
- 4) Department :
- 5) Station of which employed :
- 6) Date of Appointment :
- 7) Date of Birth :
- 8) Date of Retirement :
- 9) Level in which working as per RSRP Rules 2016 :
- 10) Pay :
- 11) Nature of Relationship to the Applicant :

Signature of Applicant

DECLARATION FORM TO BE FILLED IN BY THE SERVING RAILWAY EMPLOYEE IN THE FOLLOWING FORMAT AND ATTACHED TO THE APPLICATION FORM.

I certify that Shri./Kum. _____ Son/Daughter of Shri./Smt. _____ an applicant to be engaged as a Trainee under the Apprenticeship Act, 1961, in Rail Wheel Factory for the year 2022-23, is my _____ (Nature of relationship). I declare that above information furnished is true and correct to best of my knowledge. If it is found to be false, then I am liable to be taken for disciplinary action.

Signature of the Serving Railway Employee

SERVICE CERTIFICATE

(To be certified by the Gazetted Officer concerned under whom the Railway Servant is working at present)

Certified that Shri./Smt. _____ is employed in (Office/Shop) as _____ (Designation)

Office Seal

Signature :

Designation:

SCHEDULE – II**Medical Fitness Certificate for Standard of physical fitness for Act Apprentice Training in Rail Wheel Factory.**

Name of the Candidate	Recent passport size photo as pasted in application form.
Father Name	
Category	
Date of Birth/Age	
Trade	
Permanent identification marks	1..... 2.....	Photo to be attested by Medical Officer

Sl No.	Standard of physical fitness	Observation of Medical Officer
1.	A candidate should be free evidence of any contagious or infectious disease. He should not be suffering from any disease which is likely to be aggravated by service or is likely to render him unfit for service or endanger the health of the public. He should also be free from evidence of tuberculosis in any form, active or healed.	
2.	<u>Height, Weight and Chest</u> Candidates should satisfy the following minimum standards, namely: - Height: 137 CM, Weight: 25.4 Kg, Chest expansion should not be less than 3.8 cm irrespective of size of chest: Provided that where a candidate does not satisfy the said minimum standards but is certified in writing by a Medical Officer not below the rank of an Assistant Surgeon (Gazetted), to be physically fit for being engaged as an apprentice in a particular trade under the Apprentices Act, 1961, he may be engaged as an apprentice in that trade.	
3.	<u>Eyes-</u> There should be no evidence of any morbid condition of either eye of the lids of the either eye, which may be liable to risk of aggravation of recurrence. <u>Standard of Vision</u> (A) Visual acuity: * Candidates having vision in one eye shall be eligible to undergo apprenticeship training except in the following seventeen trades, namely:- (1) Electrician Aircraft (2) Watch and Clock Mechanic (3) Driver cum fitter (4) Surveyor (5) Process Cameraman (6) Sirdar (7) Rigger (Engg & Chem Industry) (8) Shortfirer/Blaster (Mines) (9) Mate (Mines) (10) Mech. Radio & Radar Aircraft (11) Ceramic Moduler (12) Ceramic Caster (13) Ceramic Modeller (14) Ceramic press operator (15) Ceramic Modeller (16) Ceramic Decorator (17) Optical worker. * Substituted vide GSR 221 dated 21 st April 1993. (B) Colour vision: Not required	

4.	<u>Ears-</u> Hearing must be good in both ears and there should be no sign of supportive disease. No hearing aid shall be permitted.	
5.	<u>Skin-</u> There should be no evidence of acute or chronic skin disease or chronic ulceration.	
6.	<u>Speech-</u> Speech should preferably be without impediment.	
7.	<u>Alimentary System-</u> <ol style="list-style-type: none"> 1. Candidates should have sufficient number of natural teeth (in healthy state) for mastication. 2. Spleen should not be palpably enlarged and there should be no evidence of tenderness in the splenic area. 3. Liver should not be palpable or tender. 4. There should not be oral sepsis. 5. There should be no sugar in the urine. 6. Candidates should not be suffering from haemorrhoids, fissures in and testis anal hernia or bubonocele or ischio-rectal abscess or hydrocele. 	
8.	<u>Cardio Vascular System</u> <ol style="list-style-type: none"> 1. Blood pressure should not exceed 85 diastolic and 140 systolic. 2. Candidates with low blood pressure (i.e. systolic below 100) should be rejected. 3. There should be no sign of any cardiovascular disease. 	
9.	<u>Respiratory System</u> Candidates should be free from all diseases of respiratory system. There should be no deformity of chest, which may cause impediment to breathing.	
10.	<u>Genito Urinary System-</u> There should be no evidence of genito urinary disease or any abnormality.	
11.	<u>Skeletal system</u> <ol style="list-style-type: none"> 1. The function of all limbs should be within normal limits. 2. There should be no evidence of serious deformity of the spinal column or of the extremities. 	
12.	<u>Nervous System</u> There should be no evidence of any disease of nervous system or of any mental disease.	
13.	<u>Glandular System</u> There should be no evidence of tuberculosis or other disease of the glandular system including the endocrine glands.	

Above medical fitness certificate should be signed by Government authorised Doctor (Gaz), not below rank of Asst. Surgeon of Central/State Hospital.

Signature of Medical Officer

Name of the Medical Officer

Registration No.

Designation

Name of Central/State Govt Hospital

Seal of Medical Officer signing the certificate