

**ANNEXURE – 5A**

**(For 1<sup>st</sup> PUC and 2<sup>nd</sup> PUC or 11<sup>th</sup> and 12<sup>th</sup> Std)**

**PROFORMA FOR LINGUISTIC MINORITY CERTIFICATE**

(Candidates who claim seats in Linguistic Minority colleges Status)

(This certificate is issued for the purpose of seeking admission to Under Graduate / Post Graduate Medical / Dental Courses for the Year \_\_\_\_\_)

This is to certify that Sri / Kum / Smt ..... Son /  
Daughter of ..... has studied  
from ..... Standard to ..... standard from \_\_\_\_\_ to  
\_\_\_\_\_ in \_\_\_\_\_  
\_\_\_\_\_ institution  
located at \_\_\_\_\_  
\_\_\_\_\_

Mother tongue of the student is.....as per the admission Register  
maintained in the institution.

Therefore, he / she belongs to \_\_\_\_\_ Linguistic Minority.

Institution Seal

Signature of Head of the Institution

(Name in Block Letters \_\_\_\_\_)

Place : \_\_\_\_\_

\_\_\_\_\_ Taluka

Date: \_\_\_\_\_

\_\_\_\_\_ District

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**Countersigned by Deputy Director, Pre-University**

Signature & Seal of the concerned Deputy Director, Pre-University

Date: