

## STAFF SELECTION COMMISSION

BLOCK NO. 12, CGO-COMPLEX, LODHI ROAD, NEW DELHI 110003

COMBINED GRADUATE LEVEL EXAMINATION, 2022

REGISTRATION NO: 93000637878

## APPLICATION RECEIVED (CONTENTS NOT VERIFIED)

		STATE OF THE STATE	Y		
1. NAME AS PER MATRICULATION CERTIFICATE	2. NEW/ CHANGED NAME	3. FATHER'S NAM	ME 4. MOTHER'S		
YUKTI SINGH	A CENTRAL CO	VIJAI SINGH	MANJU		
5. DATE OF BIRTH (DD/MM/YYYY)	6. AGE AS ON 01/01/2022	7. GENDER	8. CATEGO		
22/09/1998	23.3	FEMALE	SC		
9. WHETHER PERSON WITH BENCHMARK DISABILITY (PwBD) ?		9.1 IF YES, TYPE OF DISABILITY (OH, HH,VH, O			
NO		60			
10. NATIONALITY		11. MARK OF VISIBLE IDENTIFICATION			
CITIZEN OF INDIA		NO <sub>m</sub> and			
12. MATRICULATION (10th CLASS) EXAMINATION BOARD		13. MATRICULATION (10th CLASS) ROLL NO 14. MATRICULA' CLASS) YEAR O.			
BOARD OF HIGH SCHOOL AND INTERMEDIATE EDUCATION UTTAR PRADESH		0983773	व्यक्ति व्यक्त आयोग 2013		
	15. PREFERENCE OF	EXAMINATION CENTER	S		
		TION CENTER PREFERENCE )	EXAMINATION CEN' (THIRD PREFERENCE)		
BAREILLY (3005)	BAREILLY (3005) MEER		LUCKNOW (3010		
16.1. WHETHER YOU ARE AN EXSERVICEMAN (ESM) OR SERVING IN THE ARMED FORCES?	16.2. DATE OF JOINING THE ARMED FORCES (DD/MM/YYYY)		16.3. DATE OF DISCHARGI DATE OF DISCHARGE FRO FORCES (DD/MM/ Y		
NO NO STATE AND STATE	फर्मांगरी व्यव अ	intel osebné	व्यास आयोग - केलेका		
16.4. LENGTH OF SERVICE IN THE ARMED FORCES	16.5. HAVE YOU ALR POST BY AVAII RESERVATION FOR E	16.5. DATE OF JOINING TO (DD/MM/YYYY)			









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17. 1. ARE				(i.e. MORE THAN 4 FFECTED- BA) ANI		
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(CERTIFICAT	ΓΕ ΤΟ THIS EFFEC	T FROM THE CHIE ARE INSTITUTION	F MEDICAL O	AND SCRIBE IS RE FFICER/ CIVIL SUR CE OF THE EXAMI /INATION) ?	RGEON & MEDICA	AL SUPERIN
Brah	- Table	Stal a model	ited	- Aarl	Pical un	- tri
17.3. WHETHER SCRIBE IS REQUIRED ? 17.4. WILL YOU M ARRANGEMEN			The second secon	17.5. IF SCRIBE IS TO BE ARI SSC, INDICATE MED		
		Ann and	N. P.		PA PO	- 32
18.1. ARE YOU ALSO APPLYING FOR THE POST OF JUNIOR			OF JUNIOR	18.2. DO YOU POSSESS EQ FOR THE POST OF STATISTICAL OFFICER (MoSPI)?		
STATISTICAL OFFICER (MoSPI)?  NO				SIA	HSTICAL OFFICE	R (Mospi):
10.1 X	WHETHER SEEKIN	A. 480	OM 9	10.2 IE	VEC ACE DELAY	A TION COL
19.1. v			ON !	19.2. IF YES, AGE RELAXATION COD		
31/1	NO		CT EDUCATIO	NAL QUALIFICATI	-	( )
arction .	the long Studen	The second secon		Orth	IS A'USI SIMILE	disale
	Find of the latter		BCA (		LUCATION	
		21. DETAILS OF QU	JALIFYING EL GRADUA	OUCATIONAL QUA	LIFICATION	
STATUS	PASSING YEAR	STATE/ UT OF BOARD/ UNIVERSITY		NAME OF D/ UNIVERSITY	ROLL NO	PERCENT
PASSED	2018	UTTAR PRADES		ROHILKHAND NIVERSITY	7181020019	64.9
22. DO YO				L INFORMATION F		OB OPPORT
FILON	IER	MS OF DOPATS O.	.M NO.39020/1/ NO	2016-ESTT.(B) DAT	ED 21.00.2010 (	0.00
				S DETAIL and sand sand sand sand		
23. CORRESPONDENCE ADDRESS				24. PERMANENT ADDRESS		
19 SAI	19 SAHADANA THANA - BARADARI BAREILLY			19 SAHADANA THANA - BARADARI BAR		
DISTRICT: BAREILLY			E 3	DISTRICT:BAREILLY		
3	STATE: UTTAR PRADESH			STATE: UTTAR PRADESH		
PIN : 243005				PIN: 243005		
MOBILE NO: 9457203506						
4	MOBILE NO:	9457203506		EMAI	L: yuktisingh999my	/@gmail.com



FEE PAYMENT

EXEMPTED

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TRANSACTION NO

YES

AMOUNT \*\*\*\*



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## **DECLARATION**

- 1. I HAVE READ THE NOTICE OF THE EXAMINATION AND ACCEPT ALL THE TERMS & CONDITIONS ( NOTICE OF THE EXAMINATION.
- 2. I HEREBY DECLARE THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE, COMPLETE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT IN THE EVENT OF A INFORMATION BEING FOUND SUPPRESSED/FALSE OR INCORRECT OR INELIGIBILITY BEING DETEC BEFORE OR AFTER THE EXAMINATION, MY CANDIDATURE/ APPOINTMENT IS LIABLE TO BE CANCI AM WILLING TO SERVE ANYWHERE IN INDIA. विद्याह १०१८ है। इंग्लिक व्यवसारी व्यवस्था
- 3. I DECLARE THAT THE PHOTOGRAPH UPLOADED IN THE APPLICATION FORM HAS BEEN TAKEN O AFTER THE STIPULATED DATED.
- 4. I AGREE TO AUTHORIZE SSC TO USE MY AADHAR DATA FOR VERIFICATION PURPOSE.

PRINT TAKEN ON: 08/10/2022 10:12:45 PM





























































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