



री व्यवा

कर्मधारी वयम आयोग

विद्वारों स्त सरक

वयम आयोग

मेंचारी चयन आयोग कर्मधारी व्यव आयोग







वया चुत्रम

कर्मधारी वया वयम आयोग

STAFF SELECTION COMMISSION

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

Combined Graduate Level Examination, 2022

CANDIDATE'S DETAILS

REGISTRATION NUMBER	10001040252	ROLL NUMBER	9001029239
NAME	MADHU N	FATHER'S NAME	NAGARAJA SHETTY R V
MOTHER'S NAME	MANJULAMMA V	GENDER	MALE
CAT1	OBC	DATE OF BIRTH (DD/MM/YYYY)	01/02/1995
CAT2	SCTION CO.	CAT3	ECTION CO.

GIVEN OPTIONS OF POST(S) IN ORDER OF PREFERENCE:

A01,B06,B04,B15,B16,B19,D61,D62,B32,B20,B25,B28,B22,B21,B29,A02,D35,D36,B03,D39,D40,D41,D42,B12,D43,D53, D54,D47,D50,D48,D57,D58,D45,D46,D52,D51,D55,D56,D59,D60,D63,B05,B07,B08,B18,B11,B13,C34,B30,B31,D49,D44, B17,B10,B23,B27,B24,B26,B09,D38

DECLARATION

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भारत वस्त्र अ







कर्मधारी वयम आयोग



कर्मधारी व्यंग उ

1. THE OPTIONS EXERCISED ABOVE BY ME ARE FINAL. I AM ALSO FULLY AWARE THAT NO CHANGE IN THE ORDER OF PREFERENCE(S) IN THE OPTIONS EXERCISED BY ME ABOVE WOULD BE PERMITTED.

2. WHILE GIVING PREFERENCE FOR THE POSTS MENTIONED AT PARA 15.5 OF THE NOTICE OF EXAMINATION VIZ. INSPECTOR (CENTRAL EXCISE/ EXAMINER/ PREVENTIVE OFFICER), INSPECTOR AND SUB-INSPECTOR IN CBN (MINISTRY OF FINANCE), SUB-INSPECTOR/ JUNIOR INTELLIGENCE OFFICER IN NCB (MHA), SUB-INSPECTOR IN CBI AND NIA, UDC IN BRO ETC., I HAVE GONE THROUGH THE SPECIFIC REQUIREMENT OF PHYSICAL STANDARDS, PHYSICAL TESTS AND MEDICAL STANDARDS, DETAILS OF WHICH IS GIVEN AT ANNEXURE-XVII & ANNEXURE-XVIII OF THE NOTICE OF EXAMINATION. I FULLY UNDERSTAND THAT PHYSICAL AND MEDICAL STANDARDS WILL BE ASCERTAINED BY THE USER DEPARTMENTS / ORGANIZATIONS AFTER THE DECLARATION OF FINAL RESULT. I ALSO UNDERSTAND THAT THE SSC MAKES THE FINAL ALLOCATION OF POSTS IN ACCORDANCE WITH MERIT-CUM-PREFERENCE OF THE CANDIDATE AND ONCE A POST IS ALLOTTED, NO CHANGE IS MADE BY THE COMMISSION FOR ANY REASON WHATSOEVER. ACCORDINGLY, IF I AM SELECTED AND NOMINATED FOR ANY OF THESE POSTS AND SUBSEQUENTLY FAIL IN THE PHYSICAL STANDARDS/ PHYSICAL TESTS / MEDICAL STANDARDS, I AM AWARE THAT I WILL NOT BE CONSIDERED FOR ANY OTHER POST/ MINISTRIES/ DEPARTMENTS/ ORGANIZATIONS.

3. I HAVE GONE THROUGH THE ELIGIBILITY CRITERIA IN RESPECT OF EDUCATIONAL QUALIFICATION, AGE, CASTE/ CATEGORY CERTIFICATE, PWBDS CERTIFICATE, ETC. AS PRESCRIBED IN THE NOTICE OF EXAMINATION FOR THE POST(S) OPTED BY ME.

4. I CERTIFY THAT I HOLD THE REQUISITE CERTIFICATES IN SUPPORT OF MY CLAIM IN THIS REGARD AND UNDERTAKE TO PRODUCE THE SAME AS AND WHEN REQUIRED INCLUDING AT THE TIME OF DOCUMENT VERIFICATION BY THE CONCERNED USER DEPARTMENT / ORGANIZATION ALLOCATED TO ME AFTER DECLARATION OF FINAL RESULT. I UNDERSTAND THAT THE POST/ DEPARTMENT ALLOCATED TO ME WOULD BE FINAL AND ANY FAILURE ON MY PART TO PRODUCE THE REQUISITE DOCUMENTS OF ELIGIBILITY IN SUPPORT OF MY CANDIDATURE WOULD LEAD TO CANCELLATION OF MY CANDIDATURE AND THERE WOULD BE NO FURTHER CONSIDERATION OF MY CANDIDATURE FOR ANY OTHER POST/ DEPARTMENT EVEN THOUGH I MIGHT BE FULFILLING THE ELIGIBILITY CRITERIA FOR THE LATTER PREFERENCES.

5. I ALSO UNDERSTAND THAT IF ANY IN-CONGRUENCE BETWEEN MY DECLARATION IN APPLICATION FORM/ OPTION-CUM-PREFERENCE FORM AND REQUISITE DOCUMENTS IS FOUND AT ANY STAGE, MY CANDIDATURE IS LIABLE TO BE REJECTED.

6. I UNDERSTAND THAT THE OPTION-CUM-PREFERENCE EXERCISED BY ME IS FINAL AND NO SUBSEQUENT CHANGES THEREIN WOULD BE ALLOWED AFTER PRESCRIBED PERIOD GIVEN BY THE COMMISSION FOR EXERCISING THE OPTION-CUM-PREFERENCE.

7. I UNDERSTAND THAT ANY CLAIM OF MY CANDIDATURE AFTER SUCH REJECTION WILL NOT BE CONSIDERED AND ALSO THAT THE COMMISSION WOULD NOT ENTERTAIN ANY REPRESENTATION SUBMITTED THROUGH EMAIL, POST, FAX, ETC. AGAINST SUCH REJECTION.

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