




Public Service Commission U.P., PRAYAGRAJ

लोक सेवा आयोग उ०प्र०, प्रयागराज

Detailed Application Form (विस्तृत आवेदन पत्र)



Notification Details (Examination)

Advertisement Number :	A-5/E-1/2023	
Department/Directorate Name :	U.P. SECRETARIAT/ U.P. PUBLIC SERVICE COMMISSION /BOARD OF REVENUE U.P.	
Applied for Post :	ADDITIONAL PRIVATE SECRETARY EXAM-2023,	
Type of Recruitment :	GENERAL RECTT.	

Candidate's Personal Details

OTR Number :	864224527472	Application ID :	009188730000601
Candidate's Name :	AMRIT BHUSHAN JAISWAL	Father's/Husband's Name :	AMAR NATH JAISWAL
Mother's Name :	RAMBHA JAISWAL	Gender :	Male
Date of Birth :	25/12/1999	Domicile of UP :	Yes
Home State :	UTTAR PRADESH	Home District :	GORAKHPUR
Category :	OBC	Marital Status :	Single
Mobile Number :	XXX-XXX-3100	Email-ID :	****tbhushanjaiswal@gmail.com

Bank Transaction Details

Payment Gateway :	State Bank Of India	Payment Mode :	INB
Fee Amount :	Rs. 25.00	Transaction ID - Date:	CPADDBLYC2 - 29/09/2023

Candidate's Other Details :

Are you Dependent of UP Freedom Fighter?	No	Are You Skilled Player of UP? :	No
Are You Extra Ordinary Player of UP?	No	Level of Player :	---
Are you UP Ex. Army?	No	Service Duration (Day-Month-Year) :	0 - 0 - 0
Retirement Date(Date/Month/Year) :	---	Are you ECO/SSCO/CO of Army ?	No
Have you completed 5 year service ?	No	Have your services been extended for rehabilitation and no disciplinary action is pending against you ?	No
Are You Physically Handicapped (Divyangjan) of Uttar Pradesh?	Yes	A). Are you Blind or Have Vision problem? :	No
B). Are you Deaf or Have hearing problem? :	No	C). Have you any Physical Problem (Locomotor disability or Cerebral Palsy)? :	Yes

Sr. No.	PH Category [LOCOMOTOR Or CEREBRAL PALSY]	Selected PH Category
c.1.	ONE ARM AFFECTED (Right or Left) [O.A.]	<input type="checkbox"/> OA
c.2.	ONE LEG AFFECTED (Right or Left) [O.L.]	<input checked="" type="checkbox"/> OL - Yes
c.3.	BOTH ARMS AFFECTED [B.A.]	<input type="checkbox"/> BA
c.4.	BOTH LEGS AFFECTED [B.L.]	<input type="checkbox"/> BL

c.5.	ONE ARM AND ONE LEG AFFECTED [O.A.L.]	<input type="checkbox"/> OAL
c.6.	CEREBRAL PALSY [C.P.]	<input type="checkbox"/> CP
c.7.	LEPROSY CURED [L.C.]	<input type="checkbox"/> LC
c.8.	DWARFISM [D.W.]	<input type="checkbox"/> DW
c.9.	ACID ATTACK VICTIMS [A.A.V.]	<input type="checkbox"/> AAV
D). Have you any Neurological Problem? : No		E). Have you Multiple Disabilities? : No
Are You State Govt. Employee of Uttar Pradesh ? :		Service Duration (Day-Month-Year) : 0 - 0 - 0
Have you ever been Debarred from UPPSC ?:		Completion Date of Debarment (DD/MM/YYYY) : N/A

Basic Academic Qualification Details :				
S No	Examination Passed	Board Name	Year Of Passing	Roll Number
1.	High School	CENTRAL BOARD OF SECONDARY EDUCATION	2015	5051264

Essential Qualification Details					
Sr. No.	Qualification	Affirmation	University/Institute	Year Of Passing Cert/Roll Number Issue Date	Evaluation Type Obtained Marks Total Mark Percentage
1 .	Must possess Bachelors degree from a university established by law in India or a qualification recognized by the Government as equivalent thereto.	Yes	---	N/A	N/A N/A N/A N/A
2 .	Must have a minimum speed of eighty words per minute in Hindi shorthand and a minimum speed of twenty-five words per minute in Hindi typewriting on Computer.	Yes	---	N/A	N/A N/A N/A N/A
3 .	Must possess the knowledge of Computer in accordance with Certificate Course in Computing (CCC) from DOEACC OR NIELIT Certificate Course in Computing (CCC) or equivalent course from Government Institution /Government recognized university /Institution	Yes	---	N/A	N/A N/A N/A N/A
4 .	The course conducted by the Board of High School and Intermediate Education, Uttar Pradesh or a course recognised by the Government as equivalent thereto.		---	N/A	N/A N/A N/A N/A

Preferential Qualification Details		
Sr. No.	Qualification	Acquired
1 .	Served in the Territorial Army for a minimum period of two years.	No
2 .	Obtained a B certificate of National cadet corps.	No

Candidate's Permanent & Communication Address Details :			
Permanent Address		Correspondence/Mailing Address	
Address (Line 1 2 3) :	AMARNATH JAISWAL WARD NO 11 SANKARLALA NAGAR TOWN AREA PIPRAICH STATION ROAD HARILAL CHOWK POST PIPRAICH	Address (Line 1 2 3) :	AMARNATH JAISWAL WARD NO 11 SANKARLALA NAGAR TOWN AREA PIPRAICH STATION ROAD HARILAL CHOWK POST PIPRAICH
House No. :	581	House No. :	581
Street No./PO :	STATION ROAD NEAR ELECTRONIC TRANSFORMER	Street No./PO :	STATION ROAD NEAR ELECTRONIC TRANSFORMER
City Name :	GORAKHPUR	City Name :	GORAKHPUR
State :	UTTAR PRADESH	State :	UTTAR PRADESH
District Name :	GORAKHPUR	District Name :	GORAKHPUR
PIN :	273152	PIN :	273152

I accept the following declaration : :Yes

1. I hereby declare that I have read all terms & conditions according to the advertisement and I accept it.

2. I hereby declare that all the entries/statements made in this application are true, complete and correct to the best of my knowledge and belief.

3. I under take that if any information furnished or documents submitted by me are found to be false or have been concealed, then my application/candidature is liable to be rejected/cancelled by UPPSC.

Accepted : Application form has been Provisionally accepted. -

Application Form Submission Date : 29/09/2023 , Time : 11:31:22

Application Form printing Date & Time : [29/09/2023 ,11:31:30]