

कर्मचारी चयन आयोग
कर्नाटक-केरल क्षेत्र (क.के.के.)
प्रथम तल, 'ई' स्तंभ, केन्द्रीय सदन,
कोरमंगला, बंगलूर-560034
वेबसाइट: www.ssckkr.kar.nic.in
हेल्पलाइन नम्बर: 9483862020,
080-25502520
ई-मेल आई डी: enquiry.ssckkr@gmail.com



Staff Selection Commission
Karnataka-Kerala Region (KKR)
1st Floor, 'E' Wing, Kendriya Sadan,
Koramangala, Bangalore-560034
Website: www.ssckkr.kar.nic.in
Helpline No. 9483862020,
080-25502520
Email Id: enquiry.ssckkr@gmail.com

ई-प्रवेशप्रमाणपत्र / e-ADMISSION CERTIFICATE

संयुक्त उच्चतर माध्यमिक स्तर (10+2) परीक्षा, 2020 (टीयर-I)

COMBINED HIGHER SECONDARY LEVEL (10+2) EXAMINATION, 2020 (TIER-I)



अनुक्रमांक सं. :

Roll No.

:
9205002440

(यूजर आई डी के रूप में प्रयोग करें)
(to be used as User ID)

रजि.सं छ

Reg No.

प्रतिपिक के लिए विकल्प : (OWN/SSC)


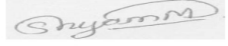
Opted for Scribe : NO

10000495603

परीक्षा के लिए पासवर्ड

Password :

:
14121998

परीक्षा तिथि/ Exam Date :	उपस्थित होने का समय / Reporting Time	प्रवेश बंद होने का समय/ Entry Closing Time
13/04/2021	1.30 PM	2.30 PM
उम्मीदवार का नाम/ Candidate's Name SHYAM MOHAN	उम्मीदवार का नया या बदला हुआ नाम Candidate's New or Changed Name	लिंग /Gender Male
जन्म तिथि / Date of Birth (DD/MM/YYYY) 14/12/1998	श्रेणी/Category OBC	 SHYAM MOHAN 03/12/2020
उम्मीदवार का पता/ Address of the candidate Kizhakkemadam amayannoor p o KOTayam		
Date & Time of Examination	परीक्षा केंद्र / Examination Venue	
13/04/2021 3.00 PM to 4.00 PM	Venue Code :9496 - iON Digital Zone iDZ Kottayam S R Arcade, Near BSNL,Thavalakuzhy, Ettumanoor PO, Kottayam, Kerala, India, 686631	

1. Candidate must carry one **original** photo identity card having the same Date of Birth (including Date, Month & Year) as printed on the Admission Certificate.

2. If photo identity card does not have the same Date of Birth (including Date, Month & Year) then the candidate must carry an additional certificate (in original) as proof of their Date of Birth.

3. In case of mismatch in the Date of Birth mentioned in the Admission Certificate and Photo ID/the certificate brought in support of Date of Birth, the candidate will not be allowed to appear in the examination.

पेपर / Paper - 1	विषय / Subject	अंक / Marks
वस्तुनिष्ठ प्रकार (Objective Type)	i. अंग्रेजी भाषा(मूल ज्ञान)	50
	ii. सामान्य बुद्धिमत्ता	50
	iii. संख्यात्मक अभिरुचि (सामान्य अंकगणितीय योग्यता)	50
	iv. सामान्य जानकारी	50

Note – Please comply with following “Instructions to candidates” and “Advisory on Covid-19”.
नोट – कृपया परीक्षा संबंधी विस्तृत निर्देश एवं कोविड-19 संबंधी निर्देशों का पालन करें।

COVID-19 Self Declaration Form

I hereby declare that I haven't been tested positive for Corona Virus or identified as a potential carrier of COVID-19 virus and I am also not having any of the symptoms related to COVID-19.

Candidate Name: _____

Candidate Roll No.: _____

Exam Name: _____

Exam Date: _____

Exam Shift: _____

Exam Venue Name: _____

Signature of Candidate: _____