

STAFF SELECTION COMMISSION

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

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

RAHUL KUMAR D.O.P-20-11-2020

REGISTRATION NO: 92000598811

APPLICATION IS INCOMPLETE

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ON COMM	MATRICULATION CERTIFICATE		NEW/ CHANGED NAME	3. FATHER'S NAME		4. MOTHER'S NAME	
ग्यम आयोग			कर्मधारी वयम आय	KAMESHWAR SIN	VGH	SONAMATI DEVI	
हारकार			6. AGE AS ON 01/01/2021	7. GENDER		8. CATEGORY	
	30/01/1998		22.11	MALE		OBC	
- 2	9. WHETHER PERSON WITH DISABILITY (PWD) ?			9.1 IF YES, TYPE OF DISABILITY (OH, HH,VH, OTHERS)			
	NO				4		
9 3	HRONG THE TOTAL TO			11. MARK OF VISIBLE IDENTIFICATION			
	CITIZEN	CITIZEN OF INDIA			ON THE LE	EFT SIDE NECK	
वंड	12. MATRICULATION (10th CLASS) EXAMINATION BOARD			13. MATRICULATION CLASS) ROLL N		14. MATRICULATION (10th CLASS) YEAR OF PASSING	
	BIHAR SCHOOL EXAMINATION BOARD			9904	SHIPS	2013	
	15. PREFERENCE OF EXAMINATION CENTERS						
2				ATION CENTRE PREFERENCE)		AMINATION CENTRE HIRD PREFERENCE)	
3	PATNA (3206)		VARANASI (3013) LUCKNOW (30		LUCKNOW (3010)		
	16. MEDIUM FOR TYPING TEST:		17. WHETHER 12TH STANDARD PASS IN SCIENCE STREAM WITH MATHEMATICS AS A SUBJECT FROM A RECOGNIZED BOARD OR EQUIVALENT(FOR C&AG AS DATA ENTRY OPERATOR):				
ON CO.	ENGLISH		YES STATES				
च्यम् आयोग ^{२त स्ट्रकार}	18.WHETHER EX- SERVICEMAN (ESM) ? 18.1. DATE OF DISCHARG FROM ARMED FORCES (DD/MM/YYYY)						
	NO -			A	1		
8	18.3. HAVE YOU ALREADY JOINED A CIVIL POST BY AVAILING BENEFIT OF RESERVATION FOR EXSERVICEMAN (ESM) ?			18.4. DATE OF JOINING THE CIVIL POST (DD/MM/YYYY)			
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A.	19.1. WHETHER SUFFERING FROM CEREBRAL-PALSY?						
	CTION GO.						

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19.2. DO YOU HAVE A PHYSICAL LIMITATION TO WRITE AND SCRIBE IS REQUIRED TO WRITE ON YOUR BEHALF (CERTIFICATE TO THIS EFFECT FROM THE CHIEF MEDICAL OFFICER/ CIVIL SURGEON & MEDICAL SUPERINTENDENT OF A GOVERNMENT HEALTH CARE INSTITUTION AS PER NOTICE OF THE EXAMINATION WOULD BE REQUIRED AT THE TIME OF EXAMINATION)?

19.3. WHETHER SCRIBE IS REQUIRED ?	19.4. WILL YOU MAKE YOUR	19.5. IF SCRIBE IS TO BE ARRANGED BY SSC, INDIMEDIUM	CATE
CTION CONTINUES	OWN		
धारी व्यन आयोग कर्मधारी व्यन आ	ARRANGEMENT OF SCRIBE ?	धिरी व्यान आयोग कर्मधारी व्यान आयोग	
ained Sistems	_<4444	अप्रित् संदर्भार अप्रित् संदर्भार	-
20. WHETHER SEEKING AGE REI	AXATION ?	20.1 IF YES, AGE RELAXATION CODE	

NO

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21. HIGHEST QUALIFICATION

BA (HONS.) (6)

		22. D	ETAILS OF QUALIFYING E	EDUCATIONAL QUA	LIFICATION	Orahan	HOK -
200	4	मधारी वयम आयाग	12TH ST	ANDARD	dan aller	अध्य क	वयम अह
	STATUS	PASSING YEAR	STATE/ UT OF BOARD/ UNIVERSITY	NAME OF BOARD/ UNIVERSITY	ROLL NO	PERCENTAGE	CGPA
	PASSED	2015	BIHAR	BIHAR SCHOOL EXAMINATION BOARD	10257	60.8	- 3

23. DO YOU WANT TO MAKE AVAILABLE YOUR PERSONAL INFORMATION FOR ACCESSING JOB OPPORTUNITY IN TERMS OF DoP&T'S O.M NO.39020/1/2016-ESTT.(B) DATED 21.06.2016 ?

YES

ADDRESS DETAIL

14 (4 12 C) A A	ADDICES	SDETAIL	32 (1) S	
24. CORRESPONI	DENCE ADDRESS	25. PERMANEI	NT ADDRESS	CTIO
VILLAGE KATARIYAN POS DIST E	T KAKARIYAN PS RAJPUR UXAR	VILLAGE KATARIYAN POS' DIST B	-101101	धारी घर
DISTRICT	: BUXAR	DISTRICT	T:BUXAR	
STATE:	BIHAR	STATE:	BIHAR	
PIN : 8	302117	PIN : 8	02117	3
MOBILE NO: 7277235484		EMAIL: rahulkumar300198@gmail.com		1
27. DATE ON WHICH PHOTOGRAPH HAS BEEN TAKEN (DD/MM/YYYY):		28. WHETHER THE DATE OF PHOTOGRAPH IS CLEARLY PRINTED ON THE PHOTOGRAPH		
20/11/2020		YE	ES CONTRACTOR OF THE PROPERTY	
FEE PAYMENT	AMOUNT	TRANSACTION NO	TRANSACTION DATE	
NOT EXEMPTED 3112121	100 री वयम आयोग	भाग प्रकार	क्रमधारी वया वयम आयोग	

DECLARATION

- 1. I HAVE READ THE NOTICE OF EXAMINATION AND ACCEPT ALL THE TERMS & CONDITIONS MENTIONED THEREIN.
- 2. I HEREBY DECLARE THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE, COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT IN THE EVENT OF ANY INFORMATION BEING FOUND SUPPRESSED/FALSE OR INCORRECT OR INELIGIBILITY BEING DETECTED BEFORE OR AFTER THE EXAMINATION, MY CANDIDATURE/ APPOINTMENT IS LIABLE TO BE CANCELLED. I AM WILLING TO SERVE ANYWHERE IN INDIA.

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IP ADDRESS: 157.42.79.214



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