

STAFF SELECTION COMMISSION

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

COMBINED HIGHER SECONDARY (10+2) LEVEL EXAMINATION, 2023

REGISTRATION NO: 94000660976





APPLICATION RECEIVED (CONTENTS NOT VERIFIED)

Ratna P	al
---------	----

1. NAME AS PER MATRICULATION CERTIFICATE	NEW/ CHANGED NAME	3. FATHER'S NAME	4. MOTHER'S NAME		
RATNA PAL		CHANCHAL PAL	LIPI PAL		
DATE OF BIRTH (DD/MM/YYYY) 6. A	GE AS ON 01/08/2023	7. GENDER	8. CATEGORY		
15/02/1999 (1997) 3177	24.5 विस्तृत आय	FEMALE 12 agrant OBC 42			
9. WHETHER PERSON WITH BENCHMARK DISABILITY (PwBD) ?		9.1 IF YES, TYPE OF DISABILITY (OH, HH,VH, OTHERS)			
NO		ACTION ACTION			
10. NATIONALITY		11. MARK OF VISIBLE IDENTIFICATION			
CITIZEN OF INDIA		A CUT MARK ON RIGHT LEG FOOT			
12. MATRICULATION (10th CLASS) EXAMINATION BOARD		13. MATRICULATION (10th CLASS) ROLL NO	14. MATRICULATION (10th CLASS) YEAR OF PASSING		
WEST BENGAL BOARD OF SECONDARY EDUCATION		403952B0014	2014		
15.	PREFERENCE OF EXA	AMINATION CENTRES	Tion Co		
EXAMINATION CENTRE (FIRST PREFERENCE)	EXAMINATIO (SECOND PRE	11 61 6	EXAMINATION CENTRE (THIRD PREFERENCE)		
KOLKATA(4410)	KALYAN	I(4419)	DURGAPUR (4426)		
16. MEDI	UM FOR COMPUTER I	BASED EXAMINATION(CBE)	2 2 E		
	ENGL	ISH			
17. MEDIUM FOR TYPING TEST:	18. WHETHER 12TH STANDARD PASS IN SCIENCE STREAM WITH MATHEMATICS AS A SUBJECT FROM A RECOGNIZED BOARD OR EQUIVALENT (FOR DEOs IN DEPARTMENT/ MINSTRY MENTIONED AT PARA 8.1 OF THE NOTICE):				
ENGLISH	वार्वासान - वार्यो	NO	योग कर्मधान		
19.1. WHETHER YOU ARE AN EX- ERVICEMAN (ESM) OR SERVING IN THE ARMED FORCES?			19.3.DATE OF DISCHARGE/ LIKELY DATE OF DISCHARGE FROM ARMED FORCES (DD/MM/ YYYY)		











19.4. LENGTH OF SERVICE IN THE ARMED FORCES	CIVIL POST BY AVARESERVATION FOR	LREADY JOINED A AILING BENEFIT OF R EX-SERVICEMAN M) ?		JOINING TO CIVIL)/MM/YYYY)	POST
				3. 2	
20. 1, ARE YOU A PERSON WITH BENC	HMARK DISABILITII	ES (40% OR MORE) IN	N THE CATEGOR	Y OF BLINDNESS	(VH)?
				N. S. C.	
20.2. ARE YOU A PERSON WITH BENCE AFFECT	ED (OH-BA) OR OH-	ES (40% OR MORE) IN CEREBRAL PALSY (1			RMS
0.3. DO YOU HAVE A PHYSICAL LIMITA THIS EFFECT FROM COMPETENT AUT EXAMINATION,	HORITY AS PER FO		E-I/ANNEXURE	IA TO THE NOTICE	
	N	0		6 1	11.0
0.4. WHETHER SCRIBE IS REQUIRED ?		MAKE YOUR OWN NT OF SCRIBE ?	A STREET OF THE OWNER OF THE PARTY NAMED IN COLUMN 2 I	E IS TO <mark>BE ARR</mark> AN NDICA <mark>TE MEDI</mark> UM	A CONTRACTOR OF THE PARTY OF TH
10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		The state of the s			
21.1. WHETHER SEEKING AGE RE	LAXATION?	21.2. IF Y	ES, AGE RELAX	ATION CODE	माठा द ^{ाण} चित्रम् अस्ति ज्य सरकार
NO			-		
22.	HIGHEST EDUCATI	ONAL QUALIFICATION	ON	177)	
عي د ي	BA (HC	ONS.) (6)	3 4	20	8
23. DETAIL	S OF QUALIFYING E	EDUCATIONAL QUAI	LIFICATION	1 1 1 1 1 1 1 1 1 1	= 1
्रे 🐪 मारावित समये 🎾 हैं 💆 💆 💆 💥 मारावित	CALL DATE OF THE PARTY OF THE P	ANDARD	E of Section of	S ¥ ₹ B	10
	TATE/ UT OF RD/ UNIVERSITY	NAME OF BOARD/ UNIVERSITY	ROLL NO	PERCENTAGE	CGPA
PASSED 2016	EST BENGAL	WEST BENGAL COUNCIL OF HIGHER SECONDARY EDUCATION, WEST BENGAL	4619211910	70.2	-
24. DO YOU WANT TO MAKE AVAILATERMS OF DO		JAL INFORMATION F 1/2016-ESTT.(B) DAT		JOB OPPORTUNIT	Y IN
TERRING OF BOIL		(O	EB 21.00.2010 :		111
मत्यमेय जयते 🔑 ह	ADDRES	S DETAIL	सत्यमेय जयते 🔑 💆	वृ अ सत्यांच	ममेरा जसते
25. CORRESPONDENCE AD	ORESS	26.	PERMANENT AI	DDRESS	(·) (·
VILL-PATABUKA POST-NATAGRAM P NORTH 24 PARGANAS PIN-		The state of the s	POST-NATAGRA H 24 PARGANAS	AM PS-GAIGHATA PIN-743249	DIST-
DISTRICT: NORTH 24 PARGANAS		DISTRICT:NORTH 24 PARGANAS		, वयका अध्यात	
STATE: WEST BENGAL		STATE: WEST BENGAL			
PIN: 743249	Yve	-4777777	PIN: 743249	Yes	
MOBILE NO: 82502411	8	EMA	IL: ratnapal170@	gmail.com	
28. WHETHER THE PHO	TOGRAPH HAS BEE	N TAKEN ON OR AFT	TER 09-FEBRUAI	RY-2023?	£ (6)
	Y	ES		1 3	FA
FEE PAYMENT	AMOUNT	TRANSACTION	ON N	RANSACTION DAT	TE
EXEMPTED				C Se F	7
				The state of the s	
CECTION COM	N COM	CECTION COM	ECTION	COM	

DECLARATION

- 1. I HAVE READ THE NOTICE OF THE EXAMINATION AND ACCEPT ALL THE TERMS & CONDITIONS OF THE NOTICE OF THE EXAMINATION.
- 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. कर्मधारी वयम आयोग कर्मधारी चयम आयोग

कर्मधारी वयम उ

कर्मधारी वयम उ



4. I AGREE TO AUTHORIZE SSC TO USE MY AADHAR DATA FOR VERIFICATION PURPOSE.

कर्मधारी वयम आयोग

कर्मधारी वयम आयोग



कर्मधारी वयम आयोग

कर्मधारी वयम आयोग