

## STAFF SELECTION COMMISSION

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

MULTI TASKING (NON-TECHNICAL) STAFF, AND HAVALDAR (CBIC & CBN) EXAMINATION, 2022







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वज्रमधारी

1. NAME AS PER MATRICULATION CERTIFICATE	2. NEW/CHANGED NAME	3. FATHER'S NAME	4. MOTHER'S NAME	
SACHIN KUMAR	F 10 20 10 10	DILIP SINGH	URMILA DEVI	
5. DATE OF BIRTH (DD/MM/YYYY)	6. AGE AS ON 01/01/2023	7. GENDER	8. CATEGORY	
30/04/2001	21.8	MALE (	OBC	
9. WHETHER PERSON WITH DISABILITY (PwD)?		9.1 IF YES, TYPE OF DISABILITY		
होग कर्मचारी व्यव NO	कर्मचारी वयम आय	कर्मधारी वयम	आयोग कर्मधारी वया वयम आव	
10. NATIONALITY		11. MARK OF VISIBLE IDENTIFICATION		
CITIZEN OF INDIA		A MOLE ON RIGHT HAND		
12. MATRICULATION (10th CLASS) EXAMINATION BOARD		13. MATRICULATION (1 CLASS) ROLL NO	0th 14. MATRICULATION (10th CLASS) YEAR OF PASSING	
BIHAR SCHOOL EXAMINATION BOARD		1800912	2018	
Y WE SEE SEE	15. PREFERENCE OF EX	XAMINATION CENTERS		
EXAMINATION CENTER (FIRST PREFERENCE)	EXAMINATION CENTER ( SECOND PREFERENCE )		EXAMINATION CENTER (THIRD PREFERENCE)	
PATNA ( 3206 )	MUZAFFAR	RPUR ( 3205 )	BHAGALPUR ( 3201 )	
कर्मधारी व्यवन आयोग	EDIUM FOR COMPLETE	D DACED EVAMINATION	क्रियारी वयम आयोग	

## 16. MEDIUM FOR COMPUTER BASED EXAMINATION(CBE)

	ENGLISH (2)	
17.1. WHETHER YOU ARE AN EX- SERVICEMAN (ESM) OR SERVING IN THE ARMED FORCES?	17.2. DATE OF JOINING THE ARMED FORCES (DD/MM/YYYY)	17.3.DATE OF DISCHARGE/ LIKELY DATE OF DISCHARGE FROM ARMED FORCES (DD/MM/ YYYY)
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	17.5. HAVE YOU ALREADY JOINED A	
17.4. LENGTH OF SERVICE IN THE	CIVIL POST BY AVAILING BENEFIT OF	17.6. DATE OF JOINING TO CIVIL POST
ARMED FORCES	RESERVATION FOR EX-SERVICEMAN	(DD/MM/YYYY)
योग कर्मधारी व्यव आयोग	(ESM) ?	गरी वयन आयोग
व्यक्ति संदक्तार	- Included the second	स्तित हारकार

18.1 ARE YOU A PERSON WITH BENCHMARK DISABILITIES (i.e. 40% OR MORE) IN THE FOLLOWING CATEGORIES:

(i) BLINDNESS (VH) AND/OR

(ii) BOTH ARMS AFFECTED (BA) AND/OR

(iii) CEREBRAL PALSY (CP)?

## 18.2 DO YOU HAVE A PHYSICAL LIMITATION TO WRITE AS PER PARA 8.2 AND 8.3 OF THE NOTICE?

18.3 WHETHER SCRIBE IS REQUIRED	18.4 WILL YOU MAKE YOUR OWN	18.5 IF SCRIBE IS TO BE
कर्मधाने करत आयोग कर्मधाने करते आयोग	ARRANGEMENT OF SCRIBE?	ARRANGED BY SSC, INDICATE MEDIUM
And the difference of the diff	The gan street	- WEDIUM

19.1. WHETHER SEEKING AGE RELAXATION?		?	19.2. IF YES,INDICATE CODE			
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و العلى		20. STATE(S) / U.	Γ.(S) / CCA(S) PREFERE	ENCE CODE	1 3 N	Ŕ
24,23,27,28,20,	,18,72,X,X,X,X	X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,	X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,	X,X,X,X,X,X,X,X	X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,X,	X,X,X,X,X,X
7000	100	21. HIGHEST E	DUCATIONAL QUALIF	ICATION		6
CACTION CO	A. Control	INTERMEDIATE	E/ HIGHER SECONDAR	Y/10+2(2)	TION COM	16.79
किर्मधानी के बार आ	योग	22. DETAILS	OF QUALIFYING EDUC	CATION	त्र व्यायोग	
अप्रथ भारकार		अधन्त शरकार	10TH STANDARD	3	भावत सरकार	
STATUS	PASSING YEAR	STATE/ UT OF BOARD/ UNIVERSITY	NAME OF BOARD/ UNIVERSITY	ROLL NO	PERCENTAGE	CGPA
PASSED	2018	BIHAR	BIHAR SCHOOL EXAMINATION BOARD	1800912	60.6	4).4.
23. DO YOU		MAKE AVAILAB <mark>LE YOUR</mark> ERMS OF DoP&T'S O.M N				TUNITY IN
	STECTION.	CONT. CT	YES	SCHON COM	1	CTIONIONG
ग	विक्रमियारी के करी	आयोग कर्मधा 🗛	DDRESS DETAIL	कर्मधारी वयम आयोग	वा वाजीय	री वया कळा उ
2	24. CORRESPO	ONDENCE ADDRESS	1 शरकार	25. PERMAN	ENT ADDRESS	मानत संच्या सरकार
VILL-DESARI PO-DESARI PS-DESARI		V	VILL-DESARI PO-DESARI PS-DESARI			

26. WHETHER THE PHOTOGRAPH HAS BEEN TAKEN ON OR AFTER 18-OCT-2022?

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FEE PAYMENT	AMOUNT	TRANSACTION NO	TRANSACTION DATE
NOT EXEMPTED	100	-447777p	4477444

## 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.
- 3. I DECLARE THAT THE PHOTOGRAPH UPLOADED IN THE APPLICATION FORM HAS BEEN TAKEN ON OR AFTER THE STIPULATED DATED.

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

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PRINT TAKEN ON: 02/02/2023 10:25:17 AM

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DISTRICT: VAISHALI

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**DISTRICT: VAISHALI** 

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