



STAFF SELECTION COMMISSION

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

COMBINED GRADUATE LEVEL EXAMINATION, 2020



20-01-2021

Sonam Sinha

REGISTRATION NO: 82000155030

APPLICATION IS PROVISIONALLY ACCEPTED

1. NAME AS PER MATRICULATION CERTIFICATE	2. NEW/ CHANGED NAME	3. FATHER'S NAME	4. MOTHER'S NAME
SONAM SINHA	-	JAY SHANKAR DAYAL	RASHMI SINHA
5. DATE OF BIRTH (DD/MM/YYYY)	6. AGE AS ON 01/01/2021	7. GENDER	8. CATEGORY
08/02/1997	23.1	FEMALE	OBC
9. WHETHER PERSON WITH DISABILITY (PWD) ?		9.1 IF YES, TYPE OF DISABILITY (OH, HH, VH, OTHERS)	
NO		-	
10. NATIONALITY		11. MARK OF VISIBLE IDENTIFICATION	
CITIZEN OF INDIA		A MOLE BELOW LEFT EYE	
12. MATRICULATION (10th CLASS) EXAMINATION BOARD		13. MATRICULATION (10th CLASS) ROLL NO	14. MATRICULATION (10th CLASS) YEAR OF PASSING
BIHAR SCHOOL EXAMINATION BOARD		0052	2011
15. PREFERENCE OF EXAMINATION CENTERS			
EXAMINATION CENTER (FIRST PREFERENCE)		EXAMINATION CENTER (SECOND PREFERENCE)	EXAMINATION CENTER (THIRD PREFERENCE)
VARANASI (3013)		PATNA (3206)	PRAYAGRAJ (3003)
16.1. WHETHER EX-SERVICEMAN (ESM) ?	16.2. LENGTH OF SERVICE IN THE ARMED FORCES (IN YEARS)	16.3. DATE OF DISCHARGE FROM ARMED FORCES (DD/MM/YYYY)	
NO	-	-	
16.4. HAVE YOU ALREADY JOINED A CIVIL POST BY AVAILING BENEFIT OF RESERVATION FOR EX-SERVICEMAN (ESM) ?		16.5. DATE OF JOINING THE CIVIL POST (DD/MM/YYYY)	
-		-	
17. 1. WHETHER SUFFERING FROM CEREBRAL-PALSY ?			
-			

17.2. 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) ?						
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17.3. WHETHER SCRIBE IS REQUIRED ?		17.4. WILL YOU MAKE YOUR OWN ARRANGEMENT OF SCRIBE ?		17.5. IF SCRIBE IS TO BE ARRANGED BY SSC, INDICATE MEDIUM		
-		-		-		
18. ARE YOU ALSO APPLYING FOR THE POST OF JUNIOR STATISTICAL OFFICER (MoSPI)?			19. DO YOU POSSESS EQ FOR THE POST OF JUNIOR STATISTICAL OFFICER (MoSPI)?			
NO			-			
20. WHETHER SEEKING AGE RELAXATION ?			20.1 IF YES, AGE RELAXATION CODE			
NO			-			
21. HIGHEST EDUCATIONAL QUALIFICATION						
B. TECH (14)						
22. DETAILS OF QUALIFYING EDUCATIONAL QUALIFICATION						
GRADUATION						
STATUS	PASSING YEAR	STATE/ UT OF BOARD/ UNIVERSITY	NAME OF BOARD/ UNIVERSITY	ROLL NO	PERCENTAGE	CGPA
PASSED	2018	BIHAR	ARYABHATTA KNOWLEDGE UNIVERSITY	14103107306	-	7.98
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 ?						
NO						
ADDRESS DETAIL						
24. CORRESPONDENCE ADDRESS			25. PERMANENT ADDRESS			
VILLAGE NAGARNAUSH PAHARPUR POST NAGARNAUSHA POLICE STATION NAGARNAUSHA			VILLAGE NAGARNAUSH PAHARPUR POST NAGARNAUSHA POLICE STATION NAGARNAUSHA			
DISTRICT: NALANDA			DISTRICT: NALANDA			
STATE: BIHAR			STATE: BIHAR			
PIN : 801305			PIN : 801305			
MOBILE NO: 7903761430			EMAIL: sonamsinha0994@gmail.com			
27. DATE ON WHICH THE UPLOADED PHOTOGRAPH HAS BEEN TAKEN (DD/MM/YYYY):			28. WHETHER THE DATE OF PHOTOGRAPH IS CLEARLY PRINTED ON THE PHOTOGRAPH			
20/01/2021			YES			
FEE PAYMENT	AMOUNT		TRANSACTION NO		TRANSACTION DATE	
EXEMPTED	-		-		-	
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.						
PRINT TAKEN ON: 22/01/2021 11:46:25 AM				IP ADDRESS:157.42.5.187		

