



STAFF SELECTION COMMISSION

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

COMBINED HIGHER SECONDARY (10+2) LEVEL
EXAMINATION 2018



REGISTRATION NO: 72001348576

APPLICATION IS PROVISIONALLY ACCEPTED

1. NAME AS PER MATRICULATION CERTIFICATE	2. NEW/CHANGED NAME	3. FATHER'S NAME	4. MOTHER'S NAME
RAKHI KUMARI	-	RAJEEV MANDAL	RANJU DEVI
5. DATE OF BIRTH (DD/MM/YYYY)	6. AGE AS ON 01/08/2019	7. GENDER	
01/08/1998	21	FEMALE	
8. CATEGORY	9. WHETHER PERSON WITH DISABILITY (PWD) ?	9.1 .IF YES, TYPE OF DISABILITY (OH, HH,VH, OTHERS)	
OBC	NO	-	
10. NATIONALITY	11. MARK OF VISIBLE IDENTIFICATION		
CITIZEN OF INDIA	A MOLE MARK ON THE LEFT HAND		
12. MATRICULATION (10th CLASS) EXAMINATION BOARD	13. MATRICULATION (10th CLASS) ROLL NO	14. MATRICULATION (10th CLASS) YEAR OF PASSING	
BIHAR SCHOOL EXAMINATION BOARD	1400018	2014	
15. PREFERENCE OF EXAMINATION CENTERS			
EXAMINATION CENTER (FIRST)	EXAMINATION CENTER (SECOND)	EXAMINATION CENTER (THIRD)	
BHAGALPUR (3201)	PATNA (3206)	MUZAFFARPUR (3205)	
16. MEDIUM OF TYPE 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)		
ENGLISH	NO		
18.WHETHER EX-SERVICEMAN (ESM)?	18.1. HAVE YOU ALREADY JOINED A CIVIL POST BY AVAILING BENEFIT OF RESERVATION FOR EX-SERVICEMAN (ESM) :?	18.2. LENGTH OF SERVICE IN ARMED FORCES (IN YEARS)	18.3. DATE OF DISCHARGE FROM ARMED FORCES (DD/MM/YYYY)
NO	-	-	-
19.1 DO YOU SUFFER FROM CEREBRAL-PALSY:			
-			
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)?			
NO			
19.3 WHETHER SCRIBE IS REQUIRED	19.4 WILL YOU MAKE YOUR OWN ARRANGEMENT OF SCRIBE?	19.5 IF SCRIBE IS TO BE ARRANGED BY SSC, INDICATE MEDIUM	

NO		-	
20. WHETHER SEEKING AGE RELAXATION?		20.1 IF YES,INDICATE CODE	
NO		-	
21. EDUCATIONAL QUALIFICATION			
INTERMEDIATE/ HIGHER SECONDARY/ 10+2			
22. DO YOU BELONG TO ECONOMICALLY WEAKER SECTIONS (EWS) ?			
NO			
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. POSTAL ADDRESS		25. PERMANENT ADDRESS	
AT- KAHARIYA, PO- BANKA, PS- BANKA, DSIT- BANKA		AT- KAHARIYA, PO- BANKA, PS- BANKA, DSIT- BANKA	
DISTRICT: BANKA		DISTRICT: BANKA	
STATE: BIHAR		STATE: BIHAR	
PIN: 813102		PIN: 813102	
MOBILE NO : 9801327494		EMAIL ID : rakhibnk3@gmail.com	
SIGNATURE			
Rakhi Kumari			
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.			

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