

STAFF SELECTION COMMISSION

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

COMBINED GRADUATE LEVEL EXAMINATION, 2021

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REGISTRATION NO: 30001826989

APPLICATION IS PROVISIONALLY ACCEPTED

AMILE CALION COMPANY	SECTION COM	EC110	N cam	3
1. NAME AS PER MATRICULATION CERTIFICATE	2. NEW/ CHANGED NAME	3. FATHER'S NAME OF THE PARTY O		NAME
UTKARSH DIXIT	-	RAJESH KUMAR DIXIT SEEMA DIXIT		IXIT
5. DATE OF BIRTH (DD/MM/YYYY)	6. AGE AS ON 01/01/2022	7. GENDER	8. CATEG	ORY
15/03/2000	21.9	MALE	UNRESER	(VED
9. WHETHER PERSON WITH DIS	SABILITY (PWD) ?	9.1 IF YES, TYPE OF DISABILITY (OH, HH,VH, OTHERS)		THERS)
NO U			i and the in	
10. NATIONALITY		11. MARK OF VISIBLE IDENTIFICATION		
CITIZEN OF INDIA		BIRTH MARK ON FOREHEAD		4.
12. MATRICULATION (10th CLASS) EXAMINATION BOARD				ATION (10th OF PASSING
CENTRAL BOARD OF SECONDARY EDUCATION (CBSE)		5370490	2015	中山
सत्यमय जयत	15. PREFERENCE OF I	EXAMINATION CENTER		2 THE HEET A
EXAMINATION CENTER (FIRST PRFERENCE)	EXAMINATION CENTER (SECOND PREFERENCE)		EXAMINATION CEN (THIRD PREFERENCE	
AGRA (3001)	and MEER	UT (3011)	BAREILLY (3005	वेया चयम आयोग
16.1. WHETHER YOU ARE AN EX- SERVICEMAN (ESM) OR SERVING IN THE ARMED FORCES?	16.2. DATE OF JOINING THE ARMED FORCES (DD/MM/YYYY)		16.3. DATE OF DISCHARGE/LIKELY DATE OF DISCHARGE FROM ARMED FORCES (DD/MM/ YYYY)	
NO	1 3 6 6	The Aff	Like Yu	8
16.4. LENGTH OF SERVICE IN THE ARMED FORCES	16.5. HAVE YOU ALREADY JOINED A CIVIL POST BY AVAILING BENEFIT OF RESERVATION FOR EX-SERVICEMAN (ESM) ?		16.5. DATE OF JOINING TO (DD/MM/YYYY	
			0. 2(0.0)	

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)?

17.3. WHETHER SCRIBE IS REQUIRED ?	17.4. WILL YOU MAKE YOUR OWN ARRANGEMENT OF SCRIBE ?		17.5. IF SCRIBE IS TO BE ARRANGED B' SSC, INDICATE MEDIUM	
LECTION CON	011	CTION COM	SCTION COM	
18.1. ARE YOU ALSO APPLYING FOR THE STATISTICAL OFFICER (Mo			POSSESS EQ FOR THE POST OF JUNIOR TISTICAL OFFICER (MoSPI)?	
NO		-417	ALLEY THE THE PARTY OF THE PART	
19.1. ARE YOU ALSO APPLYING FOR THE POST OF STATISTICAL INVESTIGATOR GRADE II (RGI)?		19.2. DO YOU POSSESS EQ FOR THE POST OF STATISTICAL INVESTIGATOR GRADE II (RGI)?		
YES		YES		
20.1. WHETHER SEEKING AGE RELAXATION ?		20.2. IF YES, AGE RELAXATION CODE		
NO NO		1 3	OU! LA LUCOU.	
21.	HIGHEST EDUCATI	ONAL QUALIFICATI	ION CONTRACTOR OF THE STATE OF	

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22. DETAILS OF QUALIFYING EDUCATIONAL QUALIFICATION					भावत सम्बत्	_{पर्} कार
GRADUATION						
STATUS	PASSING YEAR	STATE/ UT OF BOARD/ UNIVERSITY	NAME OF BOARD/ UNIVERSITY	ROLL NO	PERCENTAGE	CGPA
PASSED	2020	UTTAR PRADESH	CHOUDHARY CHARAN SINGH UNIVERSITY	1708791823	59	

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

	IES - N
ADD	PRESS DETAIL
24. CORRESPONDENCE ADDRESS	25. PERMANENT ADDRESS
SECTOR 22 NOIDA CHAURA SADATPUR	FLAT NO 538 2 FLOOR JANTA FLAT GREATER NOIDA D BLOCK SECTOR 3
DISTRICT: GAUTAM BUDDHA NAGAR	DISTRICT:GAUTAM BUDDHA NAGAR
STATE: UTTAR PRADESH	STATE: UTTAR PRADESH
PIN : 201301	PIN: 201308
MOBILE NO: 8130411242	EMAIL: coolutkarshdixit@gmail.com
27. WHETHER THE PHOTOGRAPH	HAS BEEN TAKEN ON OR AFTER 24-SEP-2021?

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C TION C	YI	ES	TION		
FEE PAYMENT	AMOUNT	TRANSACTION NO	TRANSACTION DATE		
NOT EXEMPTED	100	CPABGVICY6	25/12/2021		
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. गरी ययम आयोग कर्मधारी वयम आयोग कर्मधारी व्यव आयोग

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

