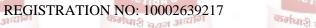


## STAFF SELECTION COMMISSION

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

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





01-02-2023

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APPI	ICA	TION	21	<b>INCOMPLE</b>	TE
$\Delta$ 1 1 L			1 11)		

1. NAME AS PER MATRICULATION CERTIFICATE	2. NEW/CHANGED NAME	3. FATHER'S NAME	4. MOTHER'S NAME	
DEEPAK GIRISH KALYANI	F 15 1	GIRISH KALYANI	VIDYAVATI SHETTAR	
5. DATE OF BIRTH (DD/MM/YYYY)	6. AGE AS ON 01/01/2023	7. GENDER	8. CATEGORY	
01/05/2000	22.8	MALE	UNRESERVED	
9. WHETHER PERSON WITH DIS	SABILITY (PwD)?	9.1 IF YES, TYPE	E OF DISABILITY	
योग कर्मधारी व्याग NO	कर्मधारी वयम आय	ग कर्मधारी व्यय आयोग	व विमिन्न वया अप	
10. NATIONALIT	Y	11. MARK OF VISIBLE IDENTIFICATION		
CITIZEN OF IND	ÍΑ	A SMALL EXTRA SKIN NEAR EYELIDS		
12. MATRICULATION (10th CLASS) E	XAMINATION BOARD	13. MATRICULATION (10th CLASS) ROLL NO	14. MATRICULATION (10th CLASS) YEAR OF PASSING	
COUNCIL FOR THE INDIAN SCHOOL CERTIFICATE EXAMINATIONS (ICSE)		6177039	2016	
मत्योग जयते 🔑 ह	15. PREFERENCE OF EX	XAMINATION CENTERS	तस्यमेव जायते 🧳 👵	
EXAMINATION CENTER ( FIRST PREFERENCE )			XAMINATION CENTER (THIRD PREFERENCE)	
BENGALURU (9001) MYSUR		U (9009)	HUBBALLI ( 9011 )	

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

## ENGLISH (2) 17.1. WHETHER YOU ARE AN EX-17.3.DATE OF DISCHARGE/ LIKELY DATE 17.2. DATE OF JOINING THE ARMED OF DISCHARGE FROM ARMED FORCES SERVICEMAN (ESM) OR SERVING FORCES (DD/MM/YYYY) IN THE ARMED FORCES? (DD/MM/ YYYY) NO 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 (DD/MM/YYYY) 12 40 400 310 ARMED FORCES RESERVATION FOR EX-SERVICEMAN री व्यम आय (ESM) ?

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 ARRANGEMENT OF SCRIBE?	18.5 IF SCRIBE IS TO BE ARRANGED BY SSC, INDICATE MEDIUM
ACCULATIVE OF	ALLEGATIVE CONTRACTOR	The CONTRACTOR

19.1. WHETHER SEEKING AGE RELAXATION?			?	19.2. IF YES,INDICATE CODE		
7 454	100	NO	59 also 4		- Ca	-
	4	20. STATE(S) / U.	T.(S) / CCA(S) PREFERE	NCE CODE	1 3 8	5
67,64,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,	Х,Х,Х,Х,Х,Х,Х,Х,	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,
21. HIGHEST EDUCATIONAL QUALIFICATION						
B. COM. (7)						
22. DETAILS OF QUALIFYING EDUCATION						
अधिय शरकार		अप्रित शरकार	10TH STANDARD	3	अन्त सरकार	
STATUS	PASSING YEAR	STATE/ UT OF BOARD/ UNIVERSITY	NAME OF BOARD/ UNIVERSITY	ROLL NO	PERCENTAGE	CGPA
PASSED	2016	DELHI	COUNCIL FOR THE INDIAN SCHOOL CERTIFICATE EXAMINATIONS (ICSE)	6177039	89	ticita ina sun
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?						

यांग	चिरि वयम आयोग	YES	अव्यास स्थान	अध्य वांच्या अधि	
ADDRESS DETAIL					
24. CC	ORRESPONDENCE ADI	ORESS	25. PERMANENT ADI	DRESS	
A STATE OF THE STA	11TH CROSS RHCS LA PORNESHWARI NAGA 560091		NO2 3B1 MAIN 11TH CROSS RHCS LAYOUT ANNAPORNESHWARI NA 560091		
Ŭ Ŭ D	ISTRICT: BENGALUR	U	DISTRICT: BENGAL	URU	
मत्यमय जयते ह	STATE: KARNATAKA		STATE: KARNATA	KA	
PIN: 560091		" " " " " " " " " " " " " " " " " " "	PIN: 560091	100	
ECTION CO. W	MOBILE NO. : 948033293	36	EMAIL ID: deepakkalyani2000	O@gmail.com	
कर्मधारी वयम आयोग	26. WHETHER THE PI	HOTOGRAPH HAS BEEN	TAKEN ON OR AFTER 18-OCT-202	22?	

YES					
FEE PAYMENT	AMOUNT	TRANSACTION NO	TRANSACTION DATE		
NOT EXEMPTED	100		A P & MALE		
DECLARATION DECLARATION 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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IP ADDRESS: 223.186.145.154

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कर्मधारी वयम 3



कर्मधारी वयम आयोग



कर्मधारी वयम आयोग



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कर्मधारी व्यव अ भारत सरकार



वयम आयोग <sub>रत हारकार</sub>



कर्मचारी वयम आयोग



कर्मधारी वयम आयोग



कर्मधारी व्यन आयोग



कर्मधारी वया वयम आयोग भागत संच्या सरकार













च्यम आयोग <sub>न्य सरकार</sub>



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