

COMBINED GRADUATE LEVEL EXAMINATION, 2020**Instructions****PLEASE BE VERY CAREFUL WHILE FILLING THE APPLICATION FORM**

1. Candidate's Name: (As per the Matriculation Certificate)

SAMPLE NAME

2. New / Changed Name:

3. Father's Name:

SAMPLE FATHER NAME

4. Mother's Name:

SAMPLE MOTHER NAME

5. Date of Birth (DD/MM/YYYY) (As per the Matriculation Certificate):

01/01/1996

6. Age as on 01/01/2021:

25.0

7. Gender:

Male

8. Category:

SC

9. Whether Person with Disability (PwD)? :

No

9.1. If Yes, Type of Disability:

10. Nationality:

Citizen of India

11. Mark of Visible Identification:

MOLE ON RIGHT CHEEK

12. Matriculation (10th Class) Examination Board:

Central Board of Secondary Education (CBSE)

13. Matriculation (10th Class) Roll No.:

2389457600

14. Matriculation (10th Class) Year of Passing:

2010

15. Preference of Examination Centres:*

CR-Agra(3001)



CR-Gorakhpur(3007)



CR-Bhagalpur(3201)



16.1 Whether Ex-Serviceman (ESM)? *	<input type="radio"/> Yes <input checked="" type="radio"/> No
16.2. Length of Service in Armed Forces (In Years):	<input type="text"/>
16.3. Date of Discharge from Armed Forces (DD/MM/YYYY):	<input type="text"/>
16.4. Have you already joined a civil post by availing benefit of reservation for Ex-Serviceman (ESM) : Please refer to the Notice of Examination, Para-5.6	<input type="radio"/> Yes <input type="radio"/> No
16.5. Date of Joining on Civil Post (DD/MM/YYYY):	<input type="text"/>
17.1. Whether suffering from Cerebral-Palsy:	<input type="radio"/> Yes <input type="radio"/> No
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.)?:	<input type="radio"/> Yes <input type="radio"/> No
17.3. Whether scribe is required?: Please see Para - 7 of the Notice	<input type="radio"/> Yes <input type="radio"/> No
17.4. Will you make your own arrangement of Scribe?:	<input type="radio"/> Yes <input type="radio"/> No
17.5. If Scribe is to be arranged by SSC, then indicate medium:	<input type="text" value="Please Select"/>
18. Are you also applying for the Post of Junior Statistical Officer (MoSPI): *	<input type="radio"/> Yes <input checked="" type="radio"/> No
19. Do you possess EQ for the Post of Junior Statistical Officer (MoSPI): *	<input type="radio"/> Yes <input type="radio"/> No
20. Whether seeking Age Relaxation? *	<input type="radio"/> Yes <input checked="" type="radio"/> No
20.1. If Yes, Age Relaxation code: Please see Para - 5.2 of the Notice	<input type="text" value="--Select Age Relaxation Code--"/>
21. Highest Educational Qualification: *	<input type="text" value="CS(Company Secretary)(39)"/>
22. Details of Qualifying Educational Qualification: *	<input type="text" value="Graduation"/>

Status	Passing Year	State/ UT of Board/ University	Name of Board/ University	Roll No	Percentage	CGPA
Passed	2015	Delhi	INDIAN INSTITUTE OF F	50397126	90	

23. Do you want to make your personal information available for accessing job opportunities in terms of DoP&T's OM.No.39020/1/2016-Estt (P) dated 21/06/2016? ☒ Yes ☐ No
[Please see Para - 20 of the Notice](#)

24. Correspondence Address: SAMPLE Present ADDRESS

State: Delhi

District: Central Delhi

Pin: 110003

25. Permanent Address Sample Permanent Address

State: Delhi

Pin: 110001

Mobile Number: 8111111111


Email: sample123@gmail.com

26. Contact Details for Other Nationals:

Photograph And Signature


Upload Photo with date printed on it
(See Para- 9.2 of Notice)*
 Allowed File Size: 20 KB to 50 KB
 Format: JPEG/ JPG
 Image Size: About 3.5 cm (width) x 4.5 cm (height)

SamplePhot...hwithdate.jpg



Upload Signature *
 Allowed File Size: 10 KB to 20 KB
 Format: JPEG/ JPG
 Image Size: About 4.0 cm (width) x 2.0 cm (height)

SampleSignature.jpg



27. Date on which the uploaded photograph has been taken(DD/MM/YYYY): 15/12/2020


28. Whether the date mentioned at S.No.27 is clearly printed on the Photograph: ☒ Yes ☐ No

Declaration

1. I have read the Notice of Examination and accept all the Terms & Conditions mentioned therein.

2. I hereby declare that all the 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 at any stage 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.

☒ I Agree



Try Another