## **Jharkhand Staff Selection Commission**

## झारखण्ड कर्मचारी चयन आयोग

## APPLICATION FORM

Jharkhand Trained Madhyamik Acharya Combined Competitive Examination (JTMACCE) 2025				
Post Category				
Post Applied				
Candidate's Name				
Father's Name				
Mother's Name				
Marital Status				
Spouse Name				
Date of Birth				
Age as on 01.08.2025				
Gender				
Resident of Jharkhand		Mobile Number:		
Nationality		Email:		
Aadhaar no.				
Identification Mark 1				
Identification Mark 2				
Caste Category:UR/ST/SC/EBC-1/BC- 2/EWS				
Ex-Servicemen: (Yes/No)		-		
Physical Disability: (Yes/No)				

Spor	orts Quota Reservation: (Yes/No)							
Do Y	Do You Have a Master Degree In Concerned Appointment Subject? (Yes/No)							
Do Y	ou Have B.Ed /B.A.	Ed /B.Sc.Ed /Into	egrated B.Ed-M	I.Ed/M.Ed?	(Yes/No)			
Addı	ress Details:					1		
Permanent Address:								
Correspondence Address:								
Edu	cational Qualification	ons						
S.N o	Examination	Name of the School/Colleg e/Institution	Board/ University Name	Year Of Passing	Total Marks	Obtain ed Marks	Perce ntage	Subject
1	10th							
2	12th/equivalent							
3	Graduation/equiv alent							
4	Post Graduation							
5	B.ed/B.A Ed/Bsc.Ed/3years integrated B.ed- M.ed/Diploma/B. Ed(Special)							
6	Others							

Payment Details			
Bank Name	DD Number	Date	Amount

## **Declaration**

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 false at any stage or not satisfying the eligibility criteria according to the requirements of the post, my candidature/appointment is liable to be cancelled/terminated.

Candidates	Signature:
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Date: