

STAFF SELECTION COMMISSION
Combined Higher Secondary Level Examination 2022
(Option form for Preference of Department/Office)

Name of the Candidate _____ Roll No. _____

Candidates should indicate their options, in order of preference, separately for the post in the following Format:

Lower Division Clerk/ Junior Secretariat Assistant: Preference Code for Ministry/ Departments/ Offices:

Code	Name of Department/Office	Code	Name of Department/Office
L01	Directorate General Border Roads (BRO), Ministry of Defence, *Only for Male Candidates	L26	Lal Bahadur Shastri National Academy of Administration (LBSNAA), Department of Personnel & Training
L02	Canteen Stores Department, Ministry of Defence	L27	Ministry of Civil Aviation
L03	Central Administrative Tribunal	L28	Department of Posts-Admn, Ministry of Communication
L04	Central Bureau of Investigation	L29	Ministry of Culture
L05	Central Electricity Authority, Ministry of Power	L30	Ministry of Electronics and Information Technology
L06	Central Vigilance Commission	L31	Military Engineer Services -Army HQ, Ministry of Defence
L07	Central Passport Office, Ministry of External Affairs	L32	Ministry of Environment, Forests & Climate Change
L08	Controller General of Accounts, Ministry of Finance	L33	Ministry of External Affairs (Cadre Cell)
L09	Controller General of Defence Accounts, Ministry of Defence	L34	Office of Controller General of Communication Accounts, Department of Telecommunications, Ministry of Communications
L10	Customs, Excise & Service Tax Appellate Tribunal, Ministry of Finance	L35	Ministry of Home Affairs
L11	Department of Agriculture Cooperation and Farmers Welfare, Ministry of Agriculture and Farmers Welfare	L36	Ministry of Housing & Urban Affairs
L12	Department of Fisheries, Ministry of Fisheries, Animal Husbandry, Dairying	L37	Ministry of Information & Broadcasting
L13	Department of Animal Husbandry and Dairying, Ministry of Fisheries, Animal Husbandry, Dairying	L38	Ministry of Labour & Employment
L14	Department of Consumer Affairs, Ministry of Consumer Affairs, Food & Public Distribution	L39	Ministry of Mines
L15	Department of Forensic Science Services, Ministry of Home Affairs	L40	Ministry of Statistics & Programme Implementation (Admn.III)

L16	Department of Science & Technology , Ministry of Science and Technology	L41	Ministry of Textiles
L17	Department of Commerce, Ministry of Commerce & Industry	L42	Ministry of Tourism
L18	Department of Financial Services , Ministry of Finance	L43	National Informatics Centre, Ministry of Electronics and Information Technology
L19	Directorate General National Cadet Corps, Ministry of Defence	L44	Office of Development Commissioner, Ministry of Micro, Small & Medium Enterprises (MSME)
L20	Directorate General of Shipping, Ministry of Ports, Shipping and Waterways	L45	Office of the JS & CAO- AFHQ, Ministry of Defence
L21	Election Commission of India	L46	Rajbhasha Vibhag, Department of Official Language, Ministry of Home Affairs
L22	Directorate General of Health Services (DGHS), Ministry of Health and Family Welfare	L47	Registrar General of India, Ministry of Home Affairs
L23	Income Tax Appellate Tribunal (ITAT), Ministry of Law & Justice	L48	Department of Water Resources, River Development & Ganga Rejuvenation, Ministry of Jal Shakti
L24	Office of the Director General of Meteorology, India Meteorological Department (IMD), Ministry of Earth Sciences	L49	Central Bureau of Narcotics, Ministry of Finance
L25	Intelligence Bureau, Ministry of Home Affairs		

Data Entry Operator Grade 'A': Preference Code for Ministry/Departments/ Offices

Code	Name of Department/Office
D50	Controller General of Accounts, Ministry of Finance
D51	Department of Animal Husbandry and Dairying, Ministry of Fisheries, Animal Husbandry, Dairying

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17

18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34

35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51

Declaration

1. The options exercised above by me are final. I am also fully aware that no change in the Order of Preference(s) in the options exercised by me above would be permitted.
2. (*)While giving preference for the post of LDC in BRO (L01), I have gone through the requirement of Physical Standard, Physical Efficiency Tests and Medical Standards for the post of Lower Division Clerk in BRO available at **Annexure-XVI** to the Notice of Examination. I fully understand that these posts carry higher physical and medical standards. I also understand that the SSC makes the final allocation of posts in accordance with Merit cum Preference of the candidate and once a post is allotted, no change is made by the Commission for any reason whatsoever. Accordingly, if I am selected and nominated for the post of LDC in BRO and subsequently fail in the physical and medical examination, I am aware that I will not be considered for any other post/ Department.
3. I have gone through the eligibility criteria in respect of Educational Qualification, Age, caste/ category certificate, PwBDs certificate, etc. as prescribed in the notice of examination for the post(s) opted by me.
4. I certify that I hold the requisite certificates in support of my claim in this regard and undertake to produce the same as and when required including at the time of Document Verification by the concerned User Department / Organization allocated to me after declaration of final result. I understand that the post/ Department allocated to me would be final and any failure on my part to produce the requisite documents of eligibility in support of my candidature would lead to cancellation of my candidature and there would be no further consideration of my candidature for any other post/ Department even though I might be fulfilling the eligibility criteria for the latter preferences.
5. I also understand that if any in-congruence between my declaration in application form/ Option-cum-Preference Form and requisite documents is found at any stage, my candidature is liable to be rejected.
6. I understand that the Option-cum-Preference exercised by me is final and no subsequent changes therein would be allowed after prescribed period given by the Commission for exercising the Option-cum-Preference.
7. I understand that any claim of my candidature after such rejection will not be considered and also that the Commission would not entertain any representation submitted through email, post, fax, etc. against such rejection.

Signature: _____

Name: _____

Date: _____

Note: This is a sample Option Form for convenience of the candidates. Options are to be filled up in the online module on the website of the Commission. No physical option form shall be accepted by the Commission.