COVID-19 Self Declaration Form

I hereby declare that I haven't been tested positive for Corona Virus.

Candidate Name: _____

Candidate Roll No.: _____

Exam Name: _____

Exam Date: _____

Exam Shift: _____

Exam Venue Name: _____

Signature of Candidate: _____

STAFF SELECTION COMMISSION (ER) STAFF SELECTION COMMISSION (ER) STAFF SELECTION COMMISSION (ER) STAFF SELECTION COMMISSION (ER) STAFF SELECTION COMMISSION (ER)

Page 4 of 7