

# Election Services Through CSC SPV

## चुनाव सत्यापन कार्यक्रम (EVP)

*Digital India*  
Power To Empower



# EVP लॉगिन पेज



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Go to Evp login Page

Click for ECI login

Click for CSC Login



# सीएससी डिजिटल सेवा पोर्टल पर लॉग इन करें

**DIGITAL SEVA CONNECT**

**Digital India**  
Power To Empower

**CSC**

2679236/89

Remember me

**SIGN IN**

Forgot password

support@csc.gov.in | 1800 3000 3458 | Digitalseva

**Welcome to Digital Seva Connect**

Gateway to CSC Network!

Digital Seva Connect is a secure authentication system for connecting our users to services available on Digital Seva portal. Enter your username and password here to authenticate your log in and enjoy seamless access to Digital Seva portal.

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# इलेक्टर्स वेरिफिकेशन प्रोग्राम (EVP) डैशबोर्ड



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# इलेक्टर्स वेरिफिकेशन प्रोग्राम (EVP)

चरण ए: - मौजूदा प्रविष्टि के ईआर विवरण देखें, सत्यापित करें और प्रमाणित करें



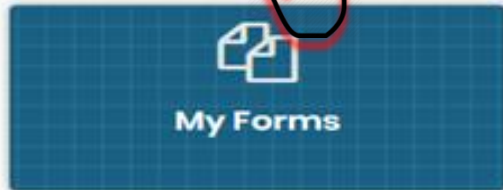
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## स्टेप ए -1: - Epic no (ईपीआईसी) नंबर डालें और सर्च पर क्लिक करें



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Epic No. \*

Q Search

Reset



No record found for given epic no.

### Contact Us

For details of eligibility criteria or any other additional information related to electoral forms, kindly visit <https://eci.gov.in>

For any other technical feedback or issues on the portal kindly send your feedback to **ECI Technical Support**

Toll free Number :1800111950

### Other Links

**Election Commission of India**

**Chief Electoral Officer**

# पंजीकृत उपयोगकर्ता - इलेक्टर (स्व सत्यापन)

## चरण A-2: - विवरणों का सत्यापन

The screenshot displays the 'National Voters' Services Portal' interface. At the top, there is a navigation bar with 'Home', 'About Us', 'Services', and 'Dashboard' links. The main content area is divided into two sections: 'My Details' and 'Verify Details'.

**My Details:** A table with the following columns: Name, Relative Name, Age, Gender, Verification Status, and Action. The data row shows: Name: Ab\*\*\*\*\*, Relative Name: Ra\*\*\*\*\*, Age: 26, Gender: Male, Verification Status: Not submitted, and Action: Verify My Details.


**Verify Details:** A form with the following fields: State: Kerala, AC: 1 - MANJESHWAR, Part: 50 - Govt. L P School, Kuloor (Western Side), Name: Ab\*\*\*\*\*, Relative Name: Ra\*\*\*\*\*, Relation Type: Father, Date of Birth: 23/08/1992, Age: 26, Gender: Male, PwD: -, House no.: 1134/78, Address: Street No. 23 \*\*\*\*\*, Mobile no.: 9834\*\*\*\*\*, Email Id: Ab\*\*\*\*\*23\*\*@gmail.com. There are two radio buttons at the bottom: 'Is information displayed above is correct.' and 'Information displayed above needs correction.'.

Blue arrows point to the 'Verify My Details' button and the 'Is information displayed above is correct.' radio button. A yellow arrow points to the 'Information displayed above needs correction.' radio button.

### विवरण का सत्यापन :-

उपयोगकर्ता निर्वाचक के व्यक्तिगत विवरण की जांच, सत्यापन और सुधार कर सकता है।

• यदि प्रदर्शित विवरण सही है तो क्लिक करें! 

• यदि प्रदर्शित विवरण में सुधार की आवश्यकता होती है तो क्लिक करें! 

# पंजीकृत उपयोगकर्ता - इलेक्टर (स्व सत्यापन)



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House no: 1134/78

Address: Street No.23\*\*\*\*\*

Mobile no: 9834\*\*\*\*\*

Email Id: Ab\*\*\*\*\*23\*\*@gmail.com

Is information displayed above is correct.

Information displayed above needs correction.

Upload Document

Upload Verification Document \*

Choose File No file chosen

Type of Document \*

Select

Document Number

Submit

यदि विवरण चरण A-2 में डिस्क्रिप्शन सही है तो

ड्रॉपडाउन में दर्शाए गए दस्तावेज अपलोड करें: -

उपयोगकर्ता दस्तावेज़ अपलोड कर दस्तावेज़ संख्या दर्ज करके सत्यापित कर सकता है।



# पंजीकृत उपयोगकर्ता - इलेक्टर (स्व सत्यापन)



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Please tick the entry which is to be corrected

- |  |   |   |                                  |
|--|---|---|----------------------------------|
| <input checked="" type="checkbox"/> Name | <input type="checkbox"/> Name of Relative | <input type="checkbox"/> Type of Relation | <input type="checkbox"/> Gender  |
| <input type="checkbox"/> Age             | <input type="checkbox"/> Date of Birth    | <input type="checkbox"/> My Photograph    | <input type="checkbox"/> Address |

Enter your correct name

Name	<input type="text" value="ravi"/>	<input type="text" value="रवी"/>	<input type="button" value="OK"/>
(b)Surname	<input type="text" value="kumar"/>	<input type="text" value="कुमार"/>	<input type="button" value="OK"/>

Upload Supporting Document

Proof for change of name \*

No file chosen

\*(Supported formats .jpg,.png,.bmp,.jpeg)(max. 2MB)

Place \*


Date \*

26/08/2019


यदि चरण A-2 में विवरणों में सुधार की आवश्यकता है तो !


उपयोगकर्ता व्यक्तिगत विवरणों को सही कर सकता है और सहायक दस्तावेज अपलोड कर सकता है

## चरण A-3: - चरण A-2 का पूर्वावलोकन



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ELECTION COMMISSION OF INDIA  
**FORM-8**  
(See Rules 13(1) and 26) of Registration of Electors Rule-1960

**Application for Correction to Particulars Entered in Electoral Roll**

To, The Electoral Registration Officer, Kerala MANJESHWAR Assembly / Parliamentary Constituency

**I request that entry relating to myself appearing in the electoral roll the above Constituency is not correct and it should be corrected.**

(a) Name	Abdul Latheef	അബ്ദുൾ ലത്തീഫ്	SPACE FOR PASTING ONE RECENT PASSPORT SIZE
(b) Surname(if any)			

(c) Details of registration with electoral roll  
Name of Assembly/ Parliamentary Constituency MANJESHWAR  
Part No. of Electoral Roll 50 Serial No. of Electoral Roll 304

(d) EPIC No. (If issued) UVF0233098

(e) Please tick the entry which is to be corrected  
Name  Photograph  EPIC  Address  Date of Birth   
Age  Name of Relative  Type of Relation  Gender

**The correct particulars in entry to be corrected are as below:-**

Name	ravi	രവി
Surname(if any)	kumar	കുമാർ
(g) Email Id(optional)		
(g) Mobile No.(optional)		

I hereby declare that the facts and particulars mentioned above are true to the best of my knowledge and belief.I am aware that making a statement or declaration which is false and which I know or believe to be false or do not believe to be true, is punishable under Section 31 of the Representation of the People Act, 1950 (43 of 1950).

Place : delhi  
Date : 26/08/2019

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# चरण बी: - मतदान केंद्र सुझाव



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## Your Polling Station Details

Assembly Constituency :	PONNANI	Parliamentary Constituency :	PONNANI
Part :	Seethi Sahib Memmorial Upper Primary School, Vadakkummuri	Polling Station :	Seethi Sahib Memmorial Upper Promary School, Vadakkummuri

## Polling station Suggestion

1. Does the approach to Polling Station is in Good Condition?  YES  NO
2. Whether there is any Natural Barrier you have to cross to reach Polling Station?  YES  NO
3. Whether distance to Polling Station is within 2 KMs?  YES  NO
4. Whether the Polling Station has ramp facilities?  YES  NO
5. Whether the Polling Station Building is in Good Condition?  YES  NO
6. Do you have a Government Building in your Polling Station Area which may be considered for making Polling Station?  YES  NO

Name of Building

Address

Submit

# इलेक्टर्स वेरिफिकेशन प्रोग्राम (EVP) डैशबोर्ड



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# चरण C: - फैमिली क्रिएट करने के बाद फैमिली मेंबर्स की ई-आर डिटेल्स देखें और प्रमाणित करें।



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## Family Details

### Your Details

Name: Neeraj Sharma

AC: KOCHI

Part no.: St.Louis HS(East portion of  
South building)

Sino in part: 168

[Add to Family](#)

### Enrolled Member

Epic Number

YBC0303180

[Add to Family](#)

[Submit](#)

परिवार समूहन :-

इलेक्टर अपने परिवार के विवरण को ईपीआईसी नंबर द्वारा एनवीएसपी पर खोजेगा।

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