

Candidate Registration Format

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : UNILA ORAON

FATHER'S NAME : GOPAL ORAON

MOTHER'S NAME : ANITA ORAON

DATE OF BIRTH : 23/10/2003

GENDER (MALE / FEMALE) : FEMALE

CATEGORY : ST

MOBILE NO. : 9162964300

AADHAR NO. : 5424 0696 2438

PERMANENT ADDRESS : NAWADIPADA, WARD NO-20 LOHARDAGA

PRESENT ADDRESS : NAWADIPADA, WARD NO-20 LOHARDAGA

RURAL / URBAN : URBAN

MARRIED / UNMARRIED : UNMARRIED

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
Metric		JAC	2020	283	56.60%
Entex	ARTS	JAC	2023	314	62.8%

EXPERIENCE (IF ANY) :

NAME OF EMPLOYER	POST / DESIGNATION	FROM	TO	OBTAINED SALARY

N.B., I declare that to the best of my knowledge information furnished by me is true.

DATE :

Unila Oraon
SIGNATURE OF CANDIDATE