

Candidate Registration Format

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : *Avedom Ooabn*

FATHER'S NAME : *Narshingh Ooabn*

MOTHER'S NAME : *Jaymanti Devi*

DATE OF BIRTH : *22-6-2005*

GENDER (MALE / FEMALE) :

CATEGORY : *Sasha*

MOBILE NO. : *7209920421*

AADHAR NO. : *5932 8155 8605*

PERMANENT ADDRESS : *chonchi*

PRESENT ADDRESS : *chonchi*

RURAL / URBAN :

MARRIED / UNMARRIED :

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE

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 : *8/9/2023*

SIGNATURE OF CANDIDATE

Avedom Ooabn

avedomooabn@gmail.com

avedomooabn