

Candidate Registration Format

FOR OFFICE USE
REG. NO. :
DATED :

NAME OF CANDIDATE : MD SADDAM HUSAIN

FATHER'S NAME : ISLAM ANSARI

MOTHER'S NAME : ZAREGNA KHATOON

DATE OF BIRTH : 10-5-2002

GENDER (MALE / FEMALE) : MALE

CATEGORY : OBL

MOBILE NO. : 9304965900

AADHAR NO. : 3755 7254 3177

PERMANENT ADDRESS :

Rahat Nager Lohardaga

PRESENT ADDRESS : Rahat Nager Lohardaga

RURAL / URBAN : RURAL

MARRIED / UNMARRIED : UNMARRIED

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10 th		ZAL	2018	227	45%

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 : 5-06-2024

MD Saddam Husain
SIGNATURE OF CANDIDATE