

Candidate Registration Format

FOR OFFICE USE

REG. NO. :

DATED :



NAME OF CANDIDATE : JYOTI TOPPO

FATHER'S NAME : RAME SHWAR ORAON

MOTHER'S NAME : PRABHU DEVI

DATE OF BIRTH : 01/01/2001

GENDER (MALE / FEMALE) : FEMALE

CATEGORY : SARNA

MOBILE NO. : 9470 5453 68

AADHAR NO. : 370135674018

PERMANENT ADDRESS : SIMA KHAS LATEHAR

PRESENT ADDRESS : SIMA KHAS LATEHAR

jyoti toppo 1121 @ gm cil .
com

RURAL / URBAN

MARRIED / UNMARRIED

QUALIFICATIONS WITH TECHNICAL (IF ANY)

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10	JAL	JAL	2018	312	62

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 : 28/08/24

ज्योति टोपो
SIGNATURE OF CANDIDATE