

Candidate Registration Format

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : NEHA RANI
FATHER'S NAME : Om PRAKASH SAHU
MOTHER'S NAME : ASHA DEVI
DATE OF BIRTH : 22, 10, 2004
GENDER (MALE / FEMALE) : FEMALE
CATEGORY : OBC
MOBILE NO. : 620/810019
AADHAR NO. : 5876 3572 5467
PERMANENT ADDRESS : LOHAR DASHA

ID - neharani620100@gmail.com

PRESENT ADDRESS : LOHAR DASHA

RURAL / URBAN :

MARRIED / UNMARRIED :

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10	10	JAC	2020	405	80%

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 :

NEHA RANI
SIGNATURE OF CANDIDATE