

Candidate Registration Format

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : RUPA TOPPO
FATHER'S NAME : MANIPAL DRAON
MOTHER'S NAME : BASANTI DRAON
DATE OF BIRTH : 15/02/2005
GENDER (MALE / FEMALE) : FEMALE

ID - Joppoxup91111 @
gmail.com

CATEGORY : ST
MOBILE NO. : 9905389812
AADHAR NO. : 886698916372
PERMANENT ADDRESS : KHAKHAPARTA LOHARDAGA

PRESENT ADDRESS : KHAKHAPARTA LOHARDAGA

RURAL / URBAN :

MARRIED / UNMARRIED :

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
JAC	10 th	10 th	2024	330	66.1

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 : 12/11/24

Rupa Toppo
SIGNATURE OF CANDIDATE