Candidate Registration Format

REG. NO. :

FOR OFFICE USE

SIGNATURE OF CANDIDATE

- Saprasahiergnaticom

				ATED :			
NAME OF CANDI	RI S	SANU					
FATHER'S NAME	: Mu	KESH SAHU					
MOTHER'S NAME	: Ası	TA DEVI					
DATE OF BIRTH :	07	12/2005					
GENDER (MALE)	FEMALE)	: FEMALE					
CATEGORY:	030	1 LI TILL					
MOBILE NO. :		425662					
AADHAR NO. : 7	632	82720908					
		LOHARDAWA					
PRESENT ADDRE		CHARAMAR CHNICAL (IF ANY):			MARRIEC	/ UNMARRIE):
EXAM PASSED	STREAM	BOARD/UNIVERSITY INSTITUTE	// PAS	SING AR	TOTAL OBTAINED MARKS		PERCENTAGE
10th	1014	JAC	20	22	u32_		.86.40
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	1. 7.	22.4					
EXPERIENCE (IF	ANY):						
NAME OF EMPLOYER		POST / DESIGNATION FR		. т	0	OBTAINE	D SALARY
		,				,	

N.B., I declare that to the best of my knowledge information furnished by me is true.

DATE: 11-11-24