

Candidate Registration Format

ak861823@gmail.com

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : ABHISHEK PRASAD

FATHER'S NAME : KRISHNA PRASAD

MOTHER'S NAME : SHANTI GUPTA

DATE OF BIRTH : 17-07-2002

GENDER (MALE / FEMALE) : MALE

CATEGORY : OBC

MOBILE NO. : 7056703398

AADHAR NO. : 739840673868

PERMANENT ADDRESS : LOHARAWA

PRESENT ADDRESS : LOHARAWA

MARRIED / UNMARRIED : UNMARRIED

RURAL / URBAN : URBAN

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10th	C.B.S.E	C.B.S.E	2016	10	9.6

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 : 10-12-2024

Abhishek Prasad
SIGNATURE OF CANDIDATE