

Candidate Registration Format

ak835302@gmail.com

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : ABHISHEK LOHRA
FATHER'S NAME : MAHINDRA LOHRA
MOTHER'S NAME : RAJKESHWARI DEVI
DATE OF BIRTH : 27-03-2003
GENDER (MALE / FEMALE) : MALE
CATEGORY : ST
MOBILE NO. : 969388 9619
AADHAR NO. : 649574075697
PERMANENT ADDRESS : LOHARAWA

PRESENT ADDRESS : LOHARAWA

RURAL / URBAN :

MARRIED / UNMARRIED :

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
JAC 10 th	JAC	JAC	2022	227	45.49

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 : 17-12-2024

Abhishek Lohra
SIGNATURE OF CANDIDATE