

Candidate Registration Format

Satyam1997@gmail.com

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : SATYAM KUMAR

FATHER'S NAME : SHYAMDEV SHHU

MOTHER'S NAME : UMILA DEVI

DATE OF BIRTH : 01-01-1997

GENDER (MALE / FEMALE) : MALE

CATEGORY : OBC

MOBILE NO. : 7070776806

AADHAR NO. : 838675389310

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
10th	JAC	JAC	2007	265	53

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 : 16-12-2024

Satyam Kumar
SIGNATURE OF CANDIDATE