

# Candidate Registration Format

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : ROSHNI KUMARI  
FATHER'S NAME : MADAN RAM  
MOTHER'S NAME : SARO DEVI  
DATE OF BIRTH : 08-05-2004  
GENDER (MALE / FEMALE) : FEMALE  
CATEGORY : HINDU  
MOBILE NO. : 8603222838  
AADHAR NO. : 481095117458  
PERMANENT ADDRESS : BHAKSO DUMAR TOLI, LOHARDAGA  
PRESENT ADDRESS : BHAKSO DUMAR TOLI LOHARDAGA

RURAL / URBAN : RURAL

MARRIED / UNMARRIED :  UNMARRIED

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10 <sup>th</sup>	JAL	JAL	2021	284	56.80

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 : 16-12-24

Roshni Kumari  
SIGNATURE OF CANDIDATE