

LJLAKU@gmail.com

## Candidate Registration Format

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : LJLAVATI KUMARI  
FATHER'S NAME : JAGARTHI LOKHA  
MOTHER'S NAME : DEWANTI DEVI  
DATE OF BIRTH : 01-01-2004  
GENDER (MALE / FEMALE) : FEMALE  
CATEGORY : ST  
MOBILE NO. : 7070153622  
AADHAR NO. : 903378388086  
PERMANENT ADDRESS : HATI ADDRESS, LOHARDAGA  
PRESENT ADDRESS : HATI ADDRESS, LOHARDAGA

RURAL / URBAN :

MARRIED / UNMARRIED :

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10 <sup>th</sup>	JAC	JAC	2020	231	46.20%

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 : 12-12-24

Lilavati Kumari  
SIGNATURE OF CANDIDATE