

Candidate Registration Format

chand2023@gmail.com

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE: CHANDANI PRAJAPATI

FATHER'S NAME: NARENDRA PRAJAPATI

MOTHER'S NAME: CHINTA DEVI

DATE OF BIRTH: 12-12-1989

GENDER (MALE / FEMALE): FEMALE

CATEGORY: OBC

MOBILE NO.: 7273912491

AADHAR NO.: 283411711650

PERMANENT ADDRESS: LOHARAWA

PRESENT ADDRESS: LOHARAWA

RURAL / URBAN :

MARRIED / UNMARRIED :

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

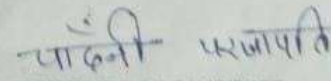
EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10th	JAC	JAC	2009	236	47

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


SIGNATURE OF CANDIDATE