

# Candidate Registration Format

ID - Sonia67@gmail.com  
PW - Sonia0123

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : SONIA ORAON  
FATHER'S NAME : BAIJNATH ORAON  
MOTHER'S NAME : ETWARI ORAON  
DATE OF BIRTH : 16-07-2005  
GENDER (MALE / FEMALE) : FEMALE  
CATEGORY : ST  
MOBILE NO. : 9942182069  
AADHAR NO. : 6770 5508 6253  
PERMANENT ADDRESS : HUMLA

PRESENT ADDRESS : HUMLA

RURAL / URBAN :

MARRIED / UNMARRIED :

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10th	JAC	JAC	2024	350	70

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 : 03-07-2025

Sonia Oraon  
SIGNATURE OF CANDIDATE