

Candidate Registration Format

ID - niranjancraon883@gmail.com

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE: NIRANJAN CRAON

FATHER'S NAME: JAGDEO CRAON

MOTHER'S NAME: BASANTI CRAON

DATE OF BIRTH: 23-08-2006

GENDER (MALE / FEMALE): MALE

CATEGORY: ST

MOBILE NO.: 8092663940

AADHAR NO.: 518134952182

PERMANENT ADDRESS: LOHARDAGA

PRESENT ADDRESS: LOHARDAGA

RURAL / URBAN :

MARRIED / UNMARRIED :

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10 th	CBSE	CBSE	2022	277	55.4%

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: 08-01-2025

Nirajan Craon
SIGNATURE OF CANDIDATE