

Candidate Registration Format

19 - Sidapanna031@gmail.com

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : SITAMUNI KUMARI

FATHER'S NAME : FULDEV ORAON

MOTHER'S NAME : ASARI ORAON

DATE OF BIRTH : 01-01-2005

GENDER (MALE / FEMALE) : FEMALE

CATEGORY : ST

MOBILE NO. : 6207168919

AADHAR NO. : 875148809410

PERMANENT ADDRESS : GUMLA

PRESENT ADDRESS : GUMLA

RURAL / URBAN :

MARRIED / UNMARRIED :

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10 th	J.A.C	J.A.C	2021	348	69.60%

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 : 11-01-2025

Sitamuni Kumari
SIGNATURE OF CANDIDATE