

# Candidate Registration Format

D - orachreewani 3636@gmail.com

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : REEWANI ORAON

FATHER'S NAME : RANTHU ORAON

MOTHER'S NAME : BIRASMUNI DEVI

DATE OF BIRTH : 01-01-2006

GENDER (MALE / FEMALE) : FEMALE

CATEGORY : ST

MOBILE NO. : 9229520664

AADHAR NO. : 40210119395

PERMANENT ADDRESS : LOHARDAHA

PRESENT ADDRESS : LOHARDAHA

RURAL / URBAN :

MARRIED / UNMARRIED :

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10th	J.A.C	J.A.C	2023	290	58%

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

Reewani Ruma  
SIGNATURE OF CANDIDATE