

Candidate Registration Format

ID - 1K0566243@gmail.com

FOR OFFICE USE
REG. NO. :
DATED :

NAME OF CANDIDATE : LALITA KUMARI
FATHER'S NAME : BIRENDAR SAHU
MOTHER'S NAME : LILAWATI DEVI
DATE OF BIRTH : 16-07-2001
GENDER (MALE / FEMALE) : FEMALE
CATEGORY : OBC
MOBILE NO. : 7858895410
AADHAR NO. : 436590971621
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	J.A.C	J.A.C	2017	300	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 : 09/01/2025

Lalita Kumari
SIGNATURE OF CANDIDATE