

Candidate Registration Format

ID - kumarisatyti 1995@gmail.com

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE: RAJNI KUMARI

FATHER'S NAME: SAIKRAM ORAOM

MOTHER'S NAME: LALITA DEVI

DATE OF BIRTH: 26/07/1995

GENDER (MALE / FEMALE): FEMALE

CATEGORY: ST

MOBILE NO.: 7782931281

AADHAR NO.: 5938 4638 1640

PERMANENT ADDRESS: LOHARAWA

PRESENT ADDRESS: LOHARAWA

RURAL / URBAN :

MARRIED / UNMARRIED :

QUALIFICATIONS WITH TECHNICAL (IF ANY) :

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10 th	JAC	JAC	2013	296	59

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: 04/02/2025

Rajni Kumari
SIGNATURE OF CANDIDATE