Candidate Registration Format

10 - nk 1225625@gmail.com

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE: NEHA KUMARI

FATHER'S NAME: BUDHMAN ORADN

MOTHER'S NAME : SABITRI DEVI

DATE OF BIRTH: 01/01/2007

GENDER (MALE / FEMALE): FEMALE

CATEGORY: ST

MOBILE NO .: 620 46 0 45 91

AADHAR NO .: 4118 3463 1340

PERMANENT ADDRESS : LOHARDAWA

PRESENTADDRESS: LOHAROAMA

RURAL / URBAN :

MARRIED / UNMARRIED :

QUALIFICATIONS WITH TECHNICAL (IF ANY):

EXAM PASSED	STREAM	BOARD/UNIVERSITY/ INSTITUTE	PASSING YEAR	TOTAL OBTAINED MARKS	PERCENTAGE
10+h	JAC	JAC	.2022	416	69

EXPERIENCE (IF ANY):

NAME OF EMPLOYER	R POST/DESIGNATION	FROM			
			TO	OBTAINED SALARY	
		A STATE OF THE PARTY OF THE PAR		TO WINTED SALARY	

N.B., I declare that to the best of my knowledge information furnished by me is true.

DATE : 08 02 | 2025