

# Candidate Registration Format

② - kumarikavita36@gmail.com

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : KAVITA KUMARI

FATHER'S NAME : MAHENDRA PRASAD

MOTHER'S NAME : MAHI DEVI

DATE OF BIRTH : 25-08-1996

GENDER (MALE / FEMALE) : FEMALE

CATEGORY : OBC

MOBILE NO. : 9852631203

AADHAR NO. : 6587 0569 0766

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
10th	JAC	JAC	2013	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 : 13/02/2025

Kavita Kumari  
SIGNATURE OF CANDIDATE