

Candidate Registration Format

ID - rajmuni.kumari36@gmail.com

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : RAJMUNI KUMARI

FATHER'S NAME : DASRATH ORAON

MOTHER'S NAME : SANJWA ORAOR

DATE OF BIRTH : 02/02/1998

GENDER (MALE / FEMALE) : FEMALE

CATEGORY : ST

MOBILE NO. : 7488 644861

AADHAR NO. : 36629 1091875

PERMANENT ADDRESS : LOHARJAWA

PRESENT ADDRESS : LOHARJAWA

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	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

Rajmuni Kumari
SIGNATURE OF CANDIDATE