

Candidate Registration Format

10 → maldikachhap67@gmail.com

FOR OFFICE USE

REG. NO. :

DATED :

NAME OF CANDIDATE : MALTI KACHAP

FATHER'S NAME : NIRODH BAGIAT

MOTHER'S NAME : SIBRAJ DEVI

DATE OF BIRTH : 08-05-1998

GENDER (MALE / FEMALE) : FEMALE

CATEGORY : ST

MOBILE NO. : 7643017488

AADHAR NO. : 714370081879

PERMANENT ADDRESS : LOHARDAGIA

PRESENT ADDRESS : LOHARDAGIA

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	2014	219	43.8

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 : 22-02-2025

Malti Kachhap
SIGNATURE OF CANDIDATE