

## Office of The Deputy Commissioner, Dibrugarh

## Training Trainings Under Registration Department Department

**Applicants Details** 

Registration Number

DCDIB202200001

Training Name

Training

Department Name

**Registration Department** 

Preasent Add.

Father's Name

Vill/Town: nagaon PS: ertertert PO: retert

Dist: ertret State: nagaon - 898989

Permanent Add.

Vill/Town: nagaon PS: ertertert PO: retert

Dist: ertret State: nagaon - 898989

Full Name

**Test Last** 

Date of Birth

Religion

2015-01-01

Gender Fe

Female tertert

Mother's Name

NA ertret