

BIODATA

Post Applied for: _____

Name of Applicant: _____

Address: _____

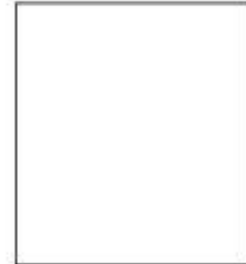
City: _____ Mob No: _____

D.O.B: _____ Gender: _____

Religion: _____ Nationality: _____

Father's Name: _____

Mother's Name: _____



Educational Qualification:

Qualification	Board/University	Year of Passing	Total Marks	Secured Marks

Permanent Address:

Address: _____

PIN: _____ STATE: _____

Declaration:

I hereby declare that the above particulars are true and correct to the best of my knowledge and belief and if the event of any information being found false or incorrect, my candidature will be liable to be canceled.

Date:

Place:

Signature