

# Recruitment Rally for Airmen Intake 01/2025



Registration No : CH2516I001084

Payment Status: **Payment Done**

Group / Trade : Airmen Group Y - Medical Assistant (For Candidate with 10+2)

Rally Venue Preference: Base Repair Depot, Air Force, Chandigarh



Paste Candidate's Photo

## PERSONAL DETAILS

Candidate's Name: AADIL AMIN RATHER

Father's Name: MOHAMMAD AMIN RATHER

Mother's Name: HAFEEZA BEGUM

Mobile No.: 9070467011

Email ID: zaidadil704@gmail.com

Aadhaar No.: 807305404742

Date of Birth: 01-01-2005

Domicile State: Jammu And Kashmir

Domicile District: Kupwara

Nationality: Indian

Visible Identification Mark: ON HAND

Gender: Male

Marital Status: Unmarried

## ADDITIONAL DETAILS

House / Street Name: 86,lokipora,langate,kupwara

Village: lokipora

Tehsil: kralgund

District: Kupwara

State: Jammu And Kashmir

Country: India

Pincode: 193302

Nearest Police Station: kralgund

Height (In Cm): 170

Chest (In Cm): 80

Waist (In Cm): 72

Are You A Certificate Holder Of National Cadet Corps (NCC) ?

No

ADDITIONAL DETAILS

Are You Children Of A Serving/Retired/Discharged/Deceased Air Force Personnel (Officer/Airmen/NC(E)/Air Force Unit Cadre Civilian) ? No

EDUCATIONAL DETAILS - 12<sup>TH</sup>

Have you passed 12<sup>th</sup>? Yes

Selected Stream: Science

Selected Education Board: The Jammu & Kashmir Board of School Education (JKBOSE)

Aggregate Percentage (As per Qualifying exam): 83

English Percentage in 12<sup>th</sup>: 79

PAYMENT DETAILS

Transaction Reference No.:	113300940830	Application Fees:	118
Transaction Date:	25-05-2024	Received Date:	25-05-2024

UPLOADED DOCUMENTS

Intermediate/ 10+2/ Equivalent Examination Marksheet	Intermediate/ 10+2/ Equivalent Examination Certificate
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Place:	Date:	Signature of the candidate
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## CONSENT FORM FOR PHYSICAL FITNESS TEST AND MEDICAL TESTS

(APPLICABLE IN RESPECT OF CANDIDATES BOTH ABOVE AND BELOW 18 YEARS OF AGE)

I, \_\_\_\_\_ son/daughter/ father/ guardian of \_\_\_\_\_ whose date of birth is \_\_\_\_\_ do hereby give my consent for myself/ son/daughter/ward to appear in the physical fitness/ medical tests, as prescribed for selection in the Indian Air Force, at my/ his/her own risk. I am aware that no compensation in any form shall be claimed, in respect of injuries/ casualty if any, sustained by myself/ my son/daughter/ my ward, during such tests.

Signature: \_\_\_\_\_

Name of candidate/parent/guardian: \_\_\_\_\_

Relationship with the candidate: \_\_\_\_\_

Date: \_\_\_\_\_

**Note:** Candidates below 18 years of age are to get the consent form signed by their parent / guardian. However, candidates above 18 years of age can sign the consent form themselves.

