

**Post Applied Details**

Candidate Photo

**Application Status**

PaymentSuccess

**Application Number**

CRPF231546661

**Candidate's Name**

MAHESH POPAT PATIL

**Date of Birth**

28/Nov/2002

**Age as on 25.01.2023**

20 Years 1 Months 29 Days

**Gender**

Male

**Marital Status**

Unmarried

**Father's Name**

POPAT LAHANU PATIL

**Mother's Name**

LALITA

**Email ID**

maheshborse2811@gmail.com

**Mobile Number**

9529970715

**Alternate Mobile Number**

9604528327

**Post Details****Post Name**

Head Constable(Ministerial)

**Post Code**

04

**Test City Preferences****Preferred Test State 1**

Maharashtra

**Preferred Test City 1**

Jalgaon

**Preferred Test State 2**

Maharashtra

**Preferred Test City 2**

Dhule

**Preferred Test State 3**

Maharashtra

**Preferred Test City 3**

Nashik

**Candidate Domicile and Category Details****Nationality**

A citizen of India

**Reservation Category**

Other Backward Class (OBC)

**Ex Servicemen Details****Are you an Ex Servicemen (ESM) or child of ESM?**

No

**Departmental Employee Details**

**Are you a Central Government. Servants who have rendered not less than 3 years regular/ continuous service as on 21/01/2023?**

No

**Are you a Children and dependent of victims killed in the 1984 riots or communal riots of 2002 in Gujarat?**

No

**Correspondence Address**

**Address Line 1**

AT MALKHEDE POST  
DULPIMPRI

**Address Line 2**

AT MALKHEDE POST  
DHULPIMPRI

**Country**

India

**State**

Maharashtra

**City/District**

Jalgaon

**Pincode/Postal Code**

425111

**Is Permanent Address Same as Correspondence address?**

Yes

**Permanent Address**

**Address Line 1**

AT MALKHEDE POST  
DULPIMPRI

**Address Line 2**

AT MALKHEDE POST  
DHULPIMPRI

**Country**

India

**State**

Maharashtra

**City/District**

Jalgaon

**Pincode/Postal Code**

425111

**Matriculation (10th) Details**

**Name of the Board/Council**

NASHIK

**Institute Name**

SADHANA MADYAMIK  
VIDYALAYA KASODA

**Please select any of the following**

Percentage

**Marks Obtained**

412

**Maximum Marks**

500

**Percentage of Marks**

(%)

82.40

**Year of Completion**

2019

**Intermediate (12th) Details**

**Name of the Board/Council**

**Institute Name**

**Please select any of the following**

NASHIK

RANI LAKSHMIBAI MA  
HAVIDYALAYA PAROL  
A

Percentage

**Marks Obtained**

495

**Maximum Marks**

600

**Percentage of Marks**

82.50

**Year of Passing**

2021

**Payment Details****Amount**

100

**Payment Mode**

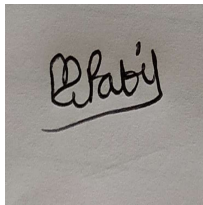
online

**Payment Status**

Payment Success

**Payment Transaction No.**

CPACJYJHE2

**Documents Upload**

Signature

Document	View / Download
To view your copy of scanned 10th class certificate/Mark sheet:	<a href="#">Click here.</a>
To view your copy of scanned 12th class certificate:	<a href="#">Click here.</a>
To view your copy of Caste Certificate:	<a href="#">Click here.</a>

**Declaration**

I hereby certify that the information given by me in this Application Form is true to the best of my knowledge. I certify that I fulfill the Govt Form eligibility criteria and undertake to produce original documents whenever necessary and I will not demand any reschedule of exam. I agree to abide by the declaration of the authorities regarding the eligibility of my application and understand that any misrepresentation or omission of facts in my application may justify cancellation of my Govt Form application & scores. I understand that all disputes will be subject to the territorial jurisdiction of city of Indore only.