ACKNOWLEDGEMENT RECEIPT ODISHA TEACHER ELIGIBILITY TEST - 2024

Registration No. **647910** Transaction ID: **418221029130**

Name of the Candidate RASHMITA

: SAMANTARAY

Mother's Name: TULASI SAMANTARAY

RAMAKANTA

Father's Name : SAMANTARAY

Date of Birth: 08/06/1996 Gender: Female

Mobile No.: 7847903928 Email ID: rashmita.jun1996@gmail.com

PWD (Physically

Caste Category: SEBC Disabled) Category NO

:

Training Status: Trained

PAPER OPTED FOR PAPER-II/SOCIAL

EXAMINATION: SCIENCE LANGUAGE OPTED : ODIA

I declare that the information furnished by me in the application form is true in all respects and in case any entry of information is found to be false, I shall entail automatic cancellation of my eligibility test besides rendering me liable to such action as the Board of Secondary Education may deem proper, I hereby undertake that I have carefully gone through the eligibility conditions prescribed in the notification, I am applying for and shall appear the eligibility test after satisfying myself that I do fulfill the same. If at any stage it is found that I do not fulfill the minimum prescribed eligibility criteria, appointment, if issued, shall stand cancelled and I shall have no right to be appointed as Teacher whatsoever.

Further I undertake that, I have entered correct information and shall not claim/apply for change of any information already entered by me at the later stage or approach before any FORUM for change of information.

