



INDIA POST

POSTMAN AND MAIL GUARD APPLICATION FORM

**Personal Details**

1. Registration No. : APPMMG284871
 2. Name : VEMPALLI VAHEEDA
 3. Father's Name : VEMPALLI MALLESU
 4. Date of Birth : 20-05-1989
 5. Nationality : Indian
 6. Gender : Female
 7. Category : OBC
 8. Are you an Ex-Service man? : No
 9. Are you a Person with Disability? : No
 10. Are you Serving as Govt. Employee? : No
 11. E-Mail ID : vaheevempalli@gmail.com
 12. Mobile No. : 9494948879
 13. Aadhaar No. : 769723794726
 14. Educational Qualification : : SSC/Matriculation

Division applied:

Division / Office		
17 - Kurnool		
Examination City-1	Examination City-2	Examination City-3
Kurnool	Vijayawada	Visakhapatnam

Educational Details :

Name of the Exam	Recognized Board.	Medium	Aggregate Percentage	Registration No/Rollno	Year of Passing
SSC / Matriculation	BOARD OF SECONDARY EDUCATION	Telugu	78	0487820	2004

Communication Details :

Permanent Address	Address For Correspondence
H.NO 2-1-262 R.KRISHNAPURAM - ALLAGADDA KURNOOL ANDHRA PRADESH - 518543	H.NO 2-1-262 R.KRISHNAPURAM - ALLAGADDA KURNOOL ANDHRA PRADESH - 518543

Declaration :

I hereby declare that I agree with all the terms and conditions given in the advertisement and that the above information given by me is correct. I understand that false statement and/or suppression of any material fact in this application will be considered sufficient cause for withdrawal of my candidature/appointment offer/dismissal without notice.

Signature of Candidate