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3. Father'	s Nam	e:	Т	Τ	Т						1						T	T	Т	T					Т				T	T	
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S. No.	Examination Passed	Course Name & Board/University/Institute	Year of Passing	Total Marks	Marks Obtained	Percentage
1	10 th passed					
2	12 th passed					
3	Graduation					
4	Post-graduation					
5	Diploma					
6	Others (if any)					

14. Educational/Professional Qualifications:

15. Work Experience (add separate sheet if required):

S.			Duration					
No.	Organization	Designation	From (DD/MM/YYYY)	To (DD/MM/YYYY)				
1.								
2.								
3.								
4.								
5.								

16. Total years of experience: _____

17. References

18. Languages known (Tick appropriate boxes)

	Re	ad Speak	Write
1.			
2.			
3.			

Note: Please attach self-attested photocopies of following documents with this form:

- 1. Educational / Professional Certificates
- 2. 10th Certificate / Birth Certificate
 3. Caste Certificate, if any.
 4. Work Experience Certificates
 5. PAN Card

- 6. Aadhar Card
- 7. Copy of EPF/ESIC Card (Pervious employer-if applicable)

(.....) Signature of Candidate with date