MAHAVIDYALAYA GURUKUL ASHRAM AMSENA ODISHA-766104 BIO DATA FORM

1. Post A	applied for:				_		Pass Port Size Photograph (Front Facing)
2. Name	of the Candida	te:					
3. Date o	of Birth :						
4. Father	r's Name:						
5. Addr	ess of Correspo	ondence:					
	cos or correspo						
		·					
5. Addre	ss of Permanen	t:					
		· · · · · · · · · · · · · · · · · · ·					
7 Conta	ct No & F-Ma	il:					
		tions (From Class-				••	
Sl.No	Examination				Total	Secui	red % of Marks
	Passed			Year Of Passing	Marks	Mark	
1							
2							
3							
4							
5							
1. Exper	ience if any:						
SI.No	Name of the Institution		Period of Service		Post with		
			From		То		Designation
1							
3							
		hereb	 v. dooloro tl	hat the ab	ove informat	ion is tr	rua & correct to the
best of r		belief & no membe					
0031 01 1	ing knowledge o	t concr & no membe	i oi uic seit	con con		iaioa io	inc.
Date:					Signatur	e:	
Docui	ment checked &	found correct:			Name	:	
c.	Of Verification	Committee:					

1. 2.