WAPCOS LTD. BIO DATA File No. 5/223/Kutch-Ahmd -Exp Date:02.04.2024

Affix Your Recent Passport Size Colour Photograph

Post applied for Management Cor																					
Region, and Pro District Panchaya	ject Su	ipervisi	on (	Consu	ıltan	су 3	Serv	ice	s fo	r C	ons										
1. Name of C	Candid	ate (as	reco	rded i	in M	atri	cula	tion	or	equ	ival	lent	cert	ifica	ate)						
										•											
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2. Father's Na	ame (a	s record	iea i	n Ma	tricu	natio	on o	r ec	Juiv	aler	it ce	ertii	1cat	e) 	1						1
																					1
	•														•						•
3. Mother's N	Name (a	as reco	ded_	in M	<u>atric</u>	ulat	ion	or e	qui	vale	nt c	certi	fica	te)							1
	1 1					I	ii							1							1
4. Sex		1.5						7	<u>5.</u>	Re	ligi	on									7
Male		Fe	male	2																	╛
6. Marital Sta	tus (If	married	l nan	ne of	spoi	use)					(Sp	ous	e N	ame	&	Nat	ion	ality	7)		
Married		Unmar																	,		
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7. a ). Date of I		YY	Y	b).	Birt	h Pla	ace/	D1S	tric	<u> </u>				c). I	31rt	h S	tate	/UT			7
																					╛
d). Nationality									е	e).	M	othe	er To	ongu	ıe						
f). Age as on d	late (31	1/03/20	24).	Year				Mo	nth	S				Day	/S						
i). Tigo as on o	(31	., 00, 20	, .	100				1,10	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Duj							
8. a). Domici	le	b). Bl	ood	group	)		c).	Ide	entii	ficat	ion	Ma	rks								
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9. Whether be	elongs t	to:																			]
SC ST	OBC	OBC	(NC	L)	Mi	nori	ty	P	WB	ME	)						Gei	nera	1		
10. Languages	s Knov	vn:																			
Language			]	Read				W	/rite	2				S	pea	ık					]
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11.	Academic/Pr	rofessional Qua	llifications:	•						
Sr. No.	Name of Examinati	on Year Passii		/Board	Subjects	Marks obtained	% of marks			
2.	Highest qual	ification acquir	ed in Hindi							
	-	-	<u>-</u>							
	_	eived if any:								
4.	Experience a	as on 31.03.202	4 (Please give	e details	thereof, use sepa	rate sheet if re	quired)			
Org	anization	Peri	od	Design	nation &	Scale of P	Scale of Pay/ Gross			
	Fro		То		ption of Duties	Salary				
5.	Corresponde	ence Address:								
				P	IN	Phone				
6.	Permanent A	Address:								
					OTN I	DI				
					PIN	Pnone				
17.	PAN:									
18	Aadhar No.:									
19.	Guardian/Er	nergency Conta	act No.:							
20.	Contact Mol	bile No.:								
21.	Valid E.Mai									
22.	Passport No									
23.	Any other in	formation:								

Information must be filled against each column clearly. In case incomplete application, the same will not be considered.

I solemnly declare that the above information is true/correct and I understand that in the event of the information found to be incorrect after my appointment, I shall be liable to be dismissed from service.

**Date** Signature