

FORMAT FOR THE POST OF LAB. ASSISTANT, FAAMCH, BARPETA

NAME OF CANDIDATE:-

DATE OF BIRTH/AGE:-

GENDER:-

ADDRESS:-

CONTACT NUMBER:-

EDUCATIONAL QUALIFICATION			
	INSTITUTIONS	MARKS OBTAINED	PERCENTAGE
HSLC			
H.S			
DMLT			
OTHERS			

EXPERIENCE	
INSTITUTIONS	DURATIONS

Signature of Candidate