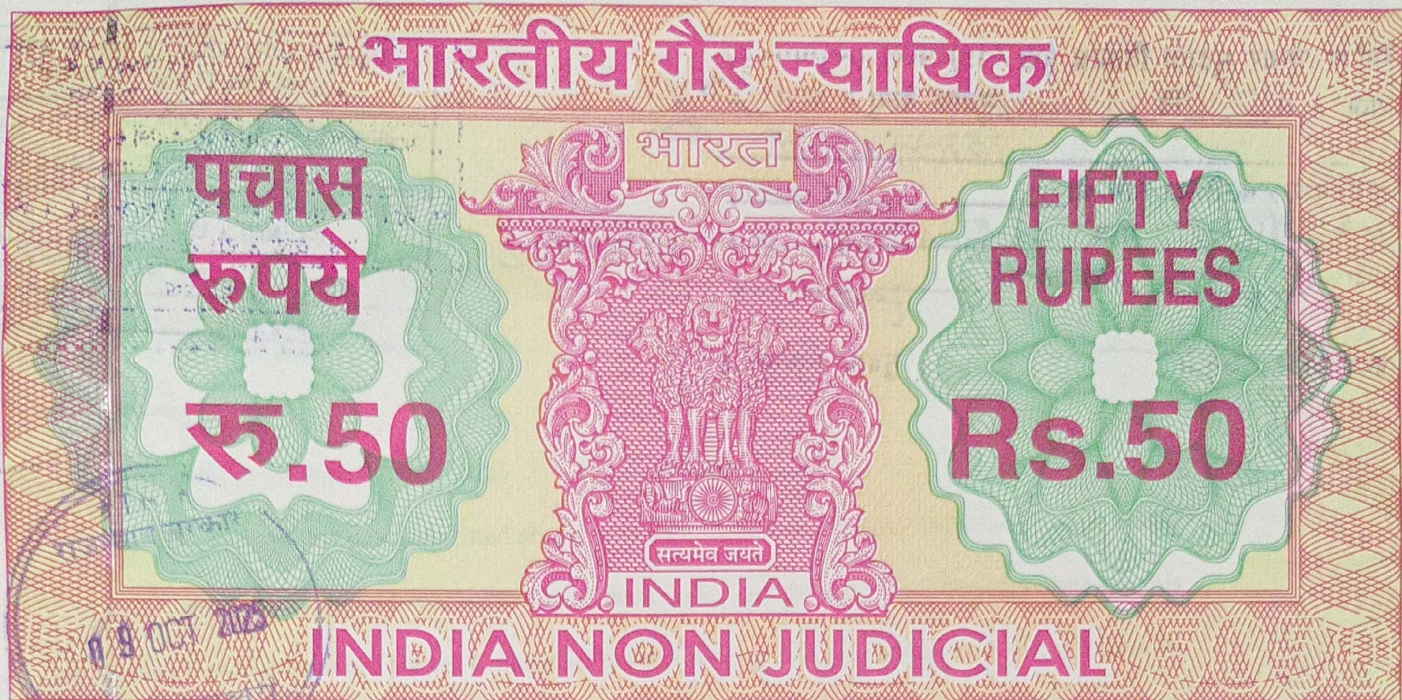




राजस्थान RAJASTHAN

CE 550870

FORMAT OF AFFIDAVIT TO BE SUBMITTED BY THE STAFF ON RS. 10/- STAMP PAPER

I, Dr. Mahaveer Prasad, son of Devi Lal, aged 05.08.1984, resident of 12DBL. VPO-DABLI KALAN, Dist Hanumangarh 335524, take oath and state my Bio-Data as given below:

Name of the candidate: Dr. Mahaveer Prasad

Father's Name: Devi Lal

Date of Birth: 05.08.1984

Permanent Address with contact No. / Fax No.: 12DBL. VPO-DABLI KALAN, Dist

Hanumangarh 335524

Mobile: 9828410788

E-mail: mahaveerpoonias8@gmail.com

Educational Qualification:

Sl. No.	Degree	College and University from where degree obtained	Year of passing	% age of marks
1	Plus 2	RBSE	2002	48.00%
2	Graduation (B.A.)	MGSU	2005	51.33%
3	Post-Graduation (M.A.)	VMOU	2017	67.56%
4	Professional Qualification (PGD Guidance & Counselling)	IGNOU	2020	59.40%

ATTESTED

CHANDER BHAN
Advocate / Notary
Regd. No. 1842/18
Hanumangarh



Experience (in Teacher Training College):

Name of College & From To

Address

M.D. College, Pallu 10.07.2025 Present

I hereby certify, that data submitted above is true to the best of my knowledge and belief. I shall be responsible for any misrepresentation of facts. I also certify that I have been appointed in this institution as Instructor: Career Counsellor in M.D. College. I also certify that I will not work in any other institution after my joining in this institution without appointment of alternate arrangement in the college and the same will be intimate to WRC, New Delhi. The attested copies of mark sheets / degree / certificates are enclosed.

Signature of Staff:

Handwritten signature
24/11/25

ATTESTED

24/11/25
CHANDER BHAN
Advocate / Notary
Regd. No. 1842/18
Hanumangarh

