

Official Information:

Name : MD. Rabbi
 Designation : Technician (AC)
 Joining Date : 02/04/2019
 Year of Experience : 0 years
 Location : HQ
 Office number : 01957-443537



Detail of Formal Education:

Degree Obtain	Institution	Passing Year	Result
Select Degree		Passing Year	

Emergency:

Contact Person : XYZ
 Relation : XYZ
 Contact Number : XYZ

Local Guardian/Relative:

Guardian Name : XYZ
 Address : XYZ
 Contact Number : XYZ

Personal Information:

Father's Name : XYZ
 Mother's Name : XYZ
 Spouse's name :
 Date of Birth : 13/02/2020
 Religion : Islam
 National Id Number : XYZ
 Blood Group : Sel
 Marital Status : Unmarried
 Present Address : XYZ
 Permanent Address : XYZ
 Contact Number : XYZ

 Signature