



AFFIDAVIT

I, ANIL SHARMA Son of GULAB CHAND SHARMA, aged (as per DOB: 25-05-1981) Resident of WARD NO 04, KHATUSHYAM JI, SIKAR take oath and state my Bio-Data as given below: -

Bio-Data

Name of the candidate		MR. ANIL SHARMA		
Father's Name		GULAB CHAND SHARMA		
Date of Birth		25-05-1981		
Permanent Address with contact No. / Fax No.		WARD NO 04, KHATUSHYAM JI, SIKAR		
Mobile:		9116511266		
Educational Qualification				
Sl. No.	Degree	College and University from where degree obtained	Year of passing	% age of marks
1.	B.Ed.	UOR-JAIPUR	2007	71%
2.	M.Ed. / MA (Education)	-	-	-
3.	PG with subject	UNIVERSITY OF RAJASTHAN (PUBLIC ADM.)	2005	59.33%
4.	NET / SLET / Ph. D	UGC (NET)	2005	-
Experience (in teacher training college) (Please attach experience certificates)				
Name of college & Address		From	To	Part time / Regular
Experience (in school) (Please attach experience certificate)				
Name of school & Address		From	To	Part time / Regular

Declaration

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 Principal / Lecturer in SHEKHAWATI GRAMIN COLLEGE BAY, DANTARAMGARH, SIKAR (Name of college / institution will full details). 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 NRC-NCTE, Jaipur. The attested copies of marks sheets / degree / certificates are enclosed.

Date: 28/01/2026

Anil Sharma
Signature of staff
Name: ANIL SHARMA

ATTESTED

NOTARY PUBLIC
SIKAR (RAJ)