REGISTRATION FORM

1. NAME OF FIRST CANDIDATE (use capital letters only)

2. AGE AS ON JANUARY 1

3. PROFESSION

4. ADDRESS

5. CONTACT NO.

6. email ID

1. NAME OF SECOND CANDIDATE (use capital letters only)

2. AGE AS ON JANUARY 1

3. PROFESSION

4. ADDRESS

5. CONTACT NO.

6. email ID

For registration details please contact Tripurainfo, HGB Road, Post Office Choumohoni, Beside Tripura Women’s Police Station, Agartala, West Tripura, Phone No.: (0381) 238-0566, 9436122741

VIP Road, Lichu Bagan, Agartala, West Tripura, Phone No.: (0381) 241-3946, 9436122741
e-mail: tripurainfoagt@gmail.com.

Last Date of Registration: 10th November, 2023 up to 6 p.m.