CURICULLUM VITAEN

NAME: SAHARSH TIWARI. Mob:-9027023631

EMAIL ID:-Harsht3631@gmail.com

ADDRESS DETAILS: NA

RESIDENTIAL ADDRESS: SHIVPUR KHURD KALA PRATAPGARH UTTAR PRADESH 230401

Personal Details:

NAME. :-SAHARSH TIWARI

DATE OF BIRTH. :-12/04/2001

FATHER NAME. :-DWARIKA PRASAD TIWARI

GENDER. :-MALE

MARITAL STATUS. :-UNMARRIED

NATIONALITY. :-INDIAN

LANGUAGES KNOWN. :-HINDI,

COMPUTER. :-BASIC KNOWLEDGE

QUALIFICATION

Examination.	Institution.	Board/ University	Year Of Passing	Division Or Percentage
10 th	SRI SANATAN SANSKRIT MAHAVIDYALYA	U.P.M.S.S.P.	2016	82.5%
12 th	SRI SANATAN SANSKRIT MAHAVIDYALYA	U.P.M.S.S.P.	2018	53.4%

Career Objective

for the professional growth of the company and myself.

Work EXPERIENCE

DECLARATIONY

I hereby declare that the above mentioned information is true to the best of my

knowledge.

PLACE:-

DATE:- YOUR FAITHFULLY

(SAHARSH TIWARI)

^{*}To Obtain a challenging career where I can utilize my abilities, strength and skills