

SESSION – AUGUST 2024

Name of the Examination _____

Stream (Arts / Commerce / Science (PCB / PCM): _____
(In case of Class 12th)

Regional Language: _____

Name of the Candidate: _____
(In Capital Letters)

Father's Name: _____

Mother's Name: _____

Date of Birth: Gender: Male ☐ Female ☐

Enrolment No: _____ Roll No. _____

I hereby declare that the aforementioned information is true to the best of my knowledge. If any information given by me found to be incorrect, I am ready to pay the correction fees which is Rs.1000 per document.

Name of the Centre _____ Centre Code _____

.....
(Signature)

Verified & Authorised by

.....
(Signature)

.....
(Name of Authorised Signatory
of the IG Centre)

.....
(Name of Authorised Signatory
of the ED TECH)