INTERMEDIATE COUNCIL OF SCHOOLING EDUCATION (INDIA)

Admission/Examination Form

Institute/Centre/Study Centre/Examination Centre Name:				
Student Nam	e (In English)			
	ie (In Eng.)			
	me (In Eng.)			
Date of Birth: Class				
Residence Ac	ldress:			
Village	P.O Mohalla		a	
St. No	Tehsil	Dist		
Pin Code	Phone No. (Own) Resi			
Other	Session	/ Year:		
	Previous	Qualifications		

Sr.	Class	Roll No.	Session	School/Distt.	Board	Result
1.						
2.						
3.						
1						

Subjects Offered:

Sr.	Subjects	Medium	Sr.	Subjects	
1.			6.		
2.			7.		
3.			8.		
4.			9.		
5.			10.		

Above detail is given by me (Student/Candidate) and I have read and understood and accept the rules and regulations, terms (offline and online) and conditions of Intermediate Council of Schooling Education and agree to abide by them.

Sign. Of Candidate:	Signature and Stamp of Institute		
(In Eng.)			