

SCHOLAR'S INSTITUTE

(A GATEWAY FOR DOCTORS & ENGGINEERS) J.B Complex, 1st Floor, C- Sector, Itanagar - 791111

Ph. : Call: 9402736082 / 6909667340

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Affix one passport size photograph here

	No. :		<u> 1155</u>	ION TE	251	
1.	Name of student	Subject :	ttora):			
	Name of student		itters).			
2.	Name of father/M	other	:			
3.	Name of Local G	uardian	:			
4.	Permanent Addre	ess Vill.	:			
		P.O	/P.S :			
		Dist	i. :			
		Stat	e :			
_						
5.	Present Address	C/o	:			
		Dis	t. :			
		Stat	te ·			
		Olai				
6.	Phone No.	Local Guardia	n :			
	Phone No.	Parents	:			
	Phone No.	Student	:			
				DAY	MONTH	YEAR
7.	Date of Birth		:			
	(conving of certificate as	proof of age to be enc	losed)			
	(copying or certificate as					
8.	Academic Record		:			
8. Clas	Academic Record	ds	:	of passing	Name of board	%age of marks
Clas	Academic Record Name of the School/Institu	ds	:	of passing	Name of board	%age of marks on aggregate
Clas	Academic Record S Name of the School/Institu	ds	:	of passing	Name of board	_
Clas	Academic Record S Name of the School/Institu	ds	:	of passing	Name of board	_
Clas X XI	Academic Record S Name of the School/Institu	ds	:	of passing	Name of board	_
Clas X XI	Academic Record S Name of the School/Institu	ds	:	of passing		_
Clas X XI	Academic Record S Name of the School/Institu	ds	:	of passing		on aggregate
Clas X XI	Academic Record S Name of the School/Institu	Place :	Year o	T CARD	(Sign.	on aggregate of Student) Affix one passport
XI XI	Academic Records Name of the School/Institution Date:	Place :	Year o	T CARD		on aggregate of Student)
XI XI	Academic Record S Name of the School/Institution Date: No. – Student Name: –	Place:	Year of	T CARD	(Sign.	on aggregate of Student) Affix one passport size photograph here.
XI XI	Academic Records Name of the School/Institution Date:	Place:	Year of	T CARD	(Sign.	on aggregate Of Student) Affix one passport size photograph here.
XI XI	Academic Record S Name of the School/Institution Date: Student Name: - F/Name: - Address: - Date of Birth:	Place:	Year o	T CARD	(Sign.	on aggregate of Student) Affix one passport size photograph here.
XI XI	Academic Record S Name of the School/Institution Date: Student Name: - F/Name: - Address: -	Place:	Year of	T CARD	(Sign.	on aggregate of Student) Affix one passport size photograph here.
XI XI	Academic Record S Name of the School/Institution Date: No. – Student Name: – F/Name: – Address: – Date of Birth: – Male / Female: –	Place:	Year of	T CARD	(Sign.	on aggregate of Student) Affix one passport size photograph here.
XI XI	Academic Record S Name of the School/Institution Date: No. – Student Name: – F/Name: – Address: – Date of Birth: – Male / Female: –	Place:	Year of	T CARD	(Sign.	on aggregate of Student) Affix one passport size photograph here.