



GOVERNMENT OF KERALA

HIGHER SECONDARY EDUCATION DEPARTMENT

FIRST/SECOND YEAR HIGHER SECONDARY /ART HIGHER SECONDARY
EXAMINATION MARCH/SAY/IMPROVEMENT 20..

APPLICATION FORM

1. Centre Name:		2. Centre Code:	
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3. Group of Examination (Tick for the correct)	Science	Humanities	Commerce	Technical	Art
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4. Type of study:	School going	Open school	Compartmental	Old Scheme
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5. Admission/ open school registration * No.		6. Year of Admission	
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7. Details of last Higher Secondary Examination Appeared (For supplementary candidates only)	Register No	Year	Month

8. Register No, Month and Year of passing SSLC			
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9. Name of the Candidate (Block letters as in SSLC)	English	
	Malayalam	

10. Sex	Male	Female	11. Religion		12. Caste	
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13. Whether belongs to	SC	ST	OBC	OEC	Others
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14. Date of Birth **	In figures	
	In words	

PASS PORT SIZE
PHOTO
(To be attested by the
Principal)

15. Subjects appearing now (Specify the subjects)
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Part I
Part III Optional 1
Part III Optional 3

Part II ***
Part III Optional 2
Part III Optional 4

16. Details of previous appearance (Class XII) ****					
	Register number	Month & Year	Subjects	Eligible/not eligible for Higher studies	Grade/Scores obtained
Part I					
Part II					
Part III	1.				
	2.				
	3.				
	4.				

*Attach copy of open school registration memo

** Attach copy of SSLC or equivalent certificate

*** Specify language/subjects

**** All the previous register numbers must be noted. Attach copies of all previous score/mark sheets

17. Details of Examination fee Remitted

	Date of remittance	If remitted in Treasury		If remitted in School Office
		Chalan No&Date	Name of Treasury	Receipt No.& Date
Examination Fee Rs.				
Certificate Fee Rs.				

18. Have you been granted Educational Concession from SC/ST Department(Yes/No)	
19. In the case of SC/ST and OBC/OEC students, state whether their present appearance is 1 st or 2 nd	
20. If second, state whether it is within a continuous period of two years(Yes/No)	

DECLARATION

Certified that the details furnished are correct

Name and signature of Candidate :

Name and signature of Father/ Guardian :

CERTIFICATE

Certified that the details furnished by the candidates were verified with this office records and found correct.

Name and signature of Class Teacher :

Name and signature of Principal :

Place :

Date :

(Office seal)

(Attach copies of SSLC or equivalent certificates, mark sheets of previous appearances, private registration memo)