Council of Higher Secondary Education, Manipur

ADMISSION NO.....

SESSION .....

EXAMINATION FORM

(FILL IN BLOCK LETTERS)

PASTE RECENT COLOUR PHOTO & ATTACH THREE

APPL. NO.

NAME

NAME FATHER/HUSBAND

NAME OF MOTHER

DATE OF BIRTH

SEX MALE FEMALE

MEDIUM

PUNJABI HINDI ENGLISH

CLASS

SCHOOL

	1	2	3	4	5	6
SUBJECTS						

PARMANENT ADDRESS

PHONE

PIN CODE

EDUCATION QUALIFICATION

EXAM PASSED	BOARD	ROLL NO.	REGISTRATION NO	PASSING YEAR	MARKS/TOTAL

FEES PAID FEES PAID D.D NO. DATED.

BRANCH OF REMITTANCE

NAME OF THE BANK

FATHER/GUARDIAN'S SIGNATURE

DATE

STUDENT'S SIGNATURE