



दिल्ली उच्चतर माध्यमिक शिक्षा परिषद्

Delhi Board Of Senior Secondary Education

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 CLASS SCHOOL
PUNJABI HINDI ENGLISH
1 2 3 4 5 6

SUBJECTS

PERMANENT ADDRESS

PHONE PIN CODE

EDUCATION QUALIFICATION	EXAM PASSED	BOARD	ROLL NO.	REGISTRATION NO	PASSING YEAR	MARKS/TOTAL
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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FEES PAID FEES PAID D.D NO. DATED.

BRANCH OF REMITTANCE NAME OF THE BANK

Declaration:

I am declaring that i knew it and well aware that the board/institute is an autonomous educational body and all educational boards/universities are autonomous bodies. Each educational organisation having discretionary powers. According these powers every board/university/state Govt./central govt of India having the liberty and right to take own decision either to allow or refuse any admission/service. The course of the board are the board's own autonomous programme. The running course is for knowledge and wisdom and not guaranteed for further educational use and job and the course for self help and self employment only. Hence I am taking admission after knowing all legal facts and own choice and without any pressure and I never be entitled to claim any way on any ground of recognition and legal status of the board/organization.

If found incorrect or wrong an any stage in documents and statement given by me the board/institute will be fully authorized to cancel admission/exam/result and forfeit the fee deposit by me.

I have read and understood and accept the rules and regulations, terms and conditions of the board/institute and agree to abide by them.

FATHER/GUARDIAN'S SIGNATURE

DATE

STUDENT'S SIGNATURE