

**APPLICATION FOR PHOTOCOPY OF ANSWER SCRIPTS OF HIGHER SECONDARY  
EXAMINATION FIRST / SECOND YEAR ..... 20.....**

**DETAILS OF FEE REMITTED**

<i>No. &amp; Date of Chalan</i>	<i>Name of treasury</i>	<i>Amount remitted</i>

1. Name of candidate [in block letters] :

2. Reg. No. :

[a] Name & Centre Number of School/Centre at which candidate took the Examination :

[b] Revenue District :

3. **Subject[s] and paper[s] for which photocopy of answer scripts is required**

<b>Sl. No.</b>	<b>Part</b>	<b>Name of paper[s]</b>	<b>Score</b>

4. Address of the candidate to which communications are to be sent [in block letters] \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PIN Code \_\_\_\_\_

Phone No: \_\_\_\_\_

Place :

Date :

SIGNATURE OF THE CANDIDATE

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Applications should be submitted to the concerned Principal before the last date stipulated.