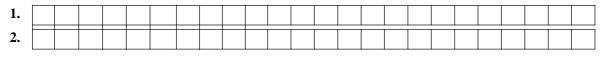


Indian Council for Hindi & Sanskrit Education भारतीय हिन्दी एवं संस्कृत शिक्षा परिषद

Re-Evaluation Form

		Da	ate	
Form No Session Dec/Jun				
Roll No.	Enrolment No.		Centre Cod	le:
Centre Name and Address :				
1. Name of Student in Capi	tal Letters			
				Space for passport size
2. Father's Name	Father's Namephotographduly attested,			
3. Mother's Name				
			Sig	nature of Candidate
	7 0			
4. Date of Birth	5. Sex	6. National		eligion
8. Tick Here: Caste : SC	S T	OBC		
9. Postal Address				
			Pin Code	
10. Phone No.		Mobile No.		
11. E-mail				
12. Details of Examination	passed from Indian Co	ouncil for Hindi & San	skrit Education	
Examination Passed	Year off Passing	Roll Number	Marks Obtaiin	Percentage

13. Subjects for Re-Evaluation required:



14. DETAILS OF FEES PAID:

Demand Draft No.:	Date:	
Amount:		

15. Documents to be enclosed: (i) Copy of Marksheets (ii) Demand Draft.

Note : (i) Demand Draft should be drawn in favour of Indian Council for Hindi & Sanskrit Education payable at New Delhi.

(ii) Form should be filled in with Black ball pen only.

Declaration:

I ______ son/daughter of ______ do hereby declare that the particulars furnished above are correct to the best of my knowledge and belief. I will fully responsible for any false and misleading information found at any stage. I also declare that I shall abide by the rules and regulation and terms & conditions issued by Indian Council for Hindi & Sanskrit Education, Delhi form time to time.

Signature of the Parents/Guardian

Signature of the Student

Date :
