## **BOARD OF SECONDARY EDUCATION, ODISHA, CUTTACK**

## APPLICATION FORM FOR 1ST SINGLE SUBJECT (10TH STANDARD) EXAMINATION IN ODIA OR 1ST HALF YEARLY ODIA LANGUAGE TEST (8TH STANDARD) IN ODIA EXAMINATION 2024

(This application form must be filled in by the candidate in his/her own hand)

	N	
1.	Name of the Candidate (In Block Letters only):-	
2.	Mother's Name (In Block Letters only) :-	(One recent photograph to be pasted here)
3.	Father's Name (In Block Letters only) :-	, ,
4.	Permanent Home Address :-	
5.	Present Postal Address for correspondence :-	
6.	Mob. No	
7.	Educational Qualification (Attested xorox copies as per instructions to be atta	ached) :—
8.	Present Employment, if any with designation/ post held :-	
9.	Date of Birth Sex Caste /	Religion  GC
10.	Application Category (Please put ✓ mark on the category which is applicable	
	(i) Single Subject (Class–X Standard) Examination in Odia	
11.	(ii) Half Yearly Odia Language Test  Payment Details :- (Please attach photo copy of the money receipt) :-  (i) Amount Deposited :	
	(ii) Money Receipt No/ Date	

	Certified that Sri/ Smt.		Son/ Daughter of
		_ is working in	with
desig	gnation	since	<u>-</u>
		SIGNATURE OF HEAD OF THE OFF	
13.	Recommendation of the	he Head of Institution where studying	
	continuing studies.)		
	Certified that Sri/ Smt.		Son/ Daughter of
		is a student of this institution since	His/ Her
date	of birth as per the recor	rds of the institution is	(in figures)
		(in words).	
		SIGNATURE OF TH INSTITUTION	
14.	Recommendation of the	e Gazetted Officer for the candidates other	than the candidates at 12
	& 13 above.		
	Certified that Sri/ Smt.		Son/ Daughter of
		is known to me since His/ Her	date of birth as per his/her
HSC	Pass Certificate/ Transfe	er Certificate is	(in figures)
		(in words).	

SIGNATURE OF THE GAZETTED OFFICER WITH SEAL