

No. **19632** **APPLICATION FOR CORRECTION ON THE ADMIT CARD/
MARK-SHEET / CERTIFICATE**

[To be submitted to the Regional Offices of the Council]

Central Office :

West Bengal Council of H. S. Education
Vidyasagar Bhavan
9/2, Block DJ, Sector-II
Salt Lake, Kolkata - 700 091

Kolkata Regional Office :

W.B. Council of H.S. Education
Bikash Bhavan
North Block (2nd Floor)
Salt Lake, Kolkata - 700 091

North Bengal Regional Office :

W.B. Council of H.S. Education
Rahul Sankrityayan Bhavan
P.O.- North Bengal University
Dist. - Darjeeling, Pin - 734430

Burdwan Regional Office :

W.B. Council of H.S. Education
Nazrul Bhavan, Behind LIC Office
5, Ichlabad (Jalkal Math)
P.O. Sripally, Dist. - Burdwan, Pin - 713103

Midnapore Regional Office :

W.B. Council of H.S. Education
Sahid Matangini Bhavan
Bidhannagar East,
72, Station Road,
P.O. - Medinipore, Dist. - Paschim Medinipore

.....Rs. 100/-
Rs. 200/-
Rs. 300/-
Rs. 500/-
Rs. 700/-

| FEES | | Rs. |
|---|--|------------------|
| A. Admit Card | | |
| a) Within 31st December of the year of issue | | NIL |
| b) Beyond 31st December of the year of issue. | | 20/- |
| B. Mark Sheet/Pass Certificate | | |
| a) Within 31st December of the year of issue | | NIL |
| b) Beyond the above period | | 100/- |

To
The OSD (KRO)/OSD (BRO)/OSD (MRO)/OSD (NBRO)
West Bengal Council of H.S. Education

Sir,

I beg to apply for correction on the original Admit Card/Mark Sheet/Certificate issued in my favour for the following examination.

| |
|---|
| For verification note by Council's Office. |
| |
| Verified : |
| Date : |

- 1) Name in full (in block letters)
- 2) Name & Code of Institution from where appeared
- 3) Higher Secondary Examination, year
- 4) Registration No. With year
- 5) Roll & No. with year
- 6) Nature of Correction
- 7) In case of Correction in Name/Surname, reason to be mentioned.
- 8) Mailing address in full
- 9) Fees for Rs.....to be paid by cash or by Bank Draft no Date of S.B.I.

.....Rs. 900/-
Rs. 1,100/-
Rs. 1,300/-
Rs. 1500/-
Rs. 1700/-

Date
Enclosed-Original Marksheet/Admit Card/Certificate (Full Signature of the applicant)

Certificate of the Head of the Institution

To
The Secretary
I hereby certify that the statements made below have been verified with the office record and found them to be true.

- 1) Name (in block letters) :
- 2) Father's/Mother's/Guardians' Name (in block letters) :
- 3) Registration No. with year :
- 4) Roll No. with year :
- 5) Subjects offered :
- 6) Others (if any) :
- 7) Signature of the Candidate :

Yours faithfully,

(Signature of the Head of the Institution with office Seal)

Code Number of the Institution

Date

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|