

Please submit application form photocopied on both sides of the sheet in A-4 size Only



# ALL INDIA COUNCIL OF COMPUTER EDUCATION

(An Autonomous Institution Registered under Public Trust Act-Govt. of India, N.C.T. New Delhi)

Head Office : 9, Vikas Nagar, Nanta Road, Kunadi, KOTA (Raj.)

## EXAMINATION FORM

1. Session : .....
2. Semester : .....
3. Reg. No. :
4. Category : ST  SC  OBC  Other
5. Name of Candidate :
6. Father's Name :
7. Date of Birth :
8. Examination Centre's Code :        
(Use Branch Code)
9. Course Name : .....
- Course Medium Hindi  English

10. Paper Appearing in I<sup>st</sup>-Semester/ II<sup>nd</sup>-Semester

### First Semester

S.No.	Paper's Name
1	
2	
3	
4	
5	
6	

### Second Semester

S.No.	Paper's Name
1	
2	
3	
4	
5	
6	

For use at study Centre regarding DD of consolidated sum

study Centre	Code No.	D.D. No. with Bank Name	D.D. Date	D.D. Amount
The serial number of the candidate from the list of study centre attached with D.D., be mentioned in this block.				
			<input type="text"/>	<input type="text"/>

Date : .....

Signature of Candidate

**DECLARATION**

(To be filled in by the candidate)

I wish to appear in the class/course \_\_\_\_\_ examination of \_\_\_\_\_ month, Year \_\_\_\_\_ of the AICCE. I have been carefully go through the rules and regulation, and I promise to abide by them. I assure you that I have filled all the information in the form true to the best of my knowledge and belief. I shall be responsible for the consequences if the information filled by me is incorrect. I know that hereafter no changes shall be made in the subects and place of examination.

Place : \_\_\_\_\_

Date : \_\_\_\_\_

Candidate's Signature

Name : \_\_\_\_\_

**ATTESTATION**

(To be filled in by the Head of the Study Centre)

This is to certify that Shri/Ku./Smt. \_\_\_\_\_ Son/Daughter of \_\_\_\_\_ is a student registered from our centre. The registration fee of Rs. \_\_\_\_\_ has been paid to the Head office on date \_\_\_\_\_ by DD No. \_\_\_\_\_ I have personally verified the eligibility from the original documents. The photo pasted on the form depicts his/her current appearance correctly. The examination fee Rs. \_\_\_\_\_ is being paid by DD No. \_\_\_\_\_ alongwith the form. I have personally checked the entries and guided the candidate for filling complete information in the columns on the form. I attest that all the entries are correct.

Affix seal/Stamp of Name  
address and Study Centre Code

Place : \_\_\_\_\_

Date : \_\_\_\_\_

<b>SEAL</b>
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.....  
Signature of Head of the Study Centre

Name .....

Phone No. with STD Code.....