Office Seal



Assam Higher Secondary Education Council

GUWAHATI - 781 021

¥,,	PLICATION FORM FOR DU		`		LEAF)
	etary, igher Secondary Education Co naidam, Guwahati - 781021	Application dated Date of receipt			
Through	the Principal,	n ro inba inka		Co	llege/H.S. School
Sir,					
I have the	e honour to request you kindly	to issue me a I	Duplicate Certi	ficate. My par	ticulars are give
below:	a production accords to Mild				
1. Name of	the candidate		energy and the		60 1 30 11
(in Block	Letters)				
2. AHSECF	Letters) Registration Number Iame in Full	MUMBER VI	of		
3. Father's N	ame in Full	1 350 mgm			20000.00000
	Name in full				
	dress : C/o				
	n				
	pened to the original Certificate				
Examination Passed	Name of the Board/Council/University	Year of Exam.	Exam Roll & No.	Divn.	Name of the Institution
HSLC	Board/Council/Offiversity	Exam.	& IVO.	- 17 - 1991	Institution
HSSLC					-ti tasi
CTD	LEAM : ARTS/SCIENCE	COMMEDO	ENOCATIO	ONAL (Disease	no tiels)
		711.51 21.712.			
Fee paid Amount Rs.	Payment receipt No.	Bank Draft No. & date	1 1		
Amount Rs.	and date	No. & date	Chanan No. & Date		
				A STATE OF THE STA	O many
	DECLARATI	ON BY THE	APPLICAL	NT	application .
I declare t	that the above particulars are to	rue to the best of	f my knowledg	e and belief. I	f any particular(s
is / are found to	be false, I shall be liable to a	ction as deem fi	it.		in the second
				Full Signature	of the Applicar
	RECOMMENI	DATION OF TH	HE PRINCIPA	L	
	ertify that Sri/Smti				
	of studer				
	ool passed the H.S. Examination				
	and was placed in	Di	ivision as Regula	ar/IP/NIP cand	idate.
Date :			Signature o	f the Principal	with seal
Place:	(Dringingl's Name in Full (in Plack I attage)				