Admission Form for Languages (Annual) Examinations,
BOARD OF INTERMEDIATE & SECONDARY EDUCATION, SAHIWAL

Form No. ____________________  __  Private  __  Roll No. ____________________
MATRIC ROLL NO. ____________________  Board ____________________  Year ____________________  __  Annual  __  Supply
INTERMEDIATE Roll No. ____________________  Board ____________________  Year ____________________  __  Annual  __  Supply
Last Roll No. Of Fazal Examination ____________________  Board ____________________  Year ____________________  __  Annual  __  Supply

PERSONAL DETAILS
Name in English (CAPITAL LETTERS) ____________________
Name in Urdu ____________________
Father’s Name in English (CAPITAL LETTERS) ____________________
Father’s Name in Urdu ____________________
Bay-Form / CNIC ____________________
Registration Number ____________________
Gender  __ Male  __ Female
Father’s/Guardian’s CNIC ____________________
Religion  __ Muslim  __ Non-Muslim
Nationality ____________________
Speciality  __ Blind  __ Handicapped  __ Prisoner  __ Board Employee

CONTACT INFORMATION
District ____________________  Tehsil ____________________
Postal Address ____________________
Father’s/Guardian’s Mobile No. ____________________  Institution Contact No. ____________________
Email Address ____________________
Name of Examination ____________________

PROPOSED CENTRE
Subjects: ____________________  ____________________  ____________________  ____________________  ____________________  ____________________

BANK INFORMATION
Bank Name ____________________  Amount ____________________  Challan No. ____________________  Date ____________________

Affidavit: I have read this form. The data/information on this form and in online system is same as last entered/modified/provided by me and its correctness is only my responsibility. I understand that only the information/data provided in the online system along with the photograph and some other handwritten details on this form will be used for further processing. I accept all the terms and conditions in this regard.

Candidate’s Signature ____________________
In URDU

Candidate’s Signature ____________________
In ENGLISH

Signature & Stamp of Attesting Authority (Head Of The Institution) ____________________
CNIC No. ____________________