Form No. ______________________  Regular  Private  Roll No. ______________________

Name of Institution (for Regular Candidates) ____________________________  Institute Code. ____________________

Name of Facilitation Centre (for Private Candidates) ____________________

MATRIC Roll No. ______________________  Board. ______________________  Year. ______________________  Annual  Supply

INTERMEDIATE Last Roll No. ______________________  Board. ______________________  Year. ______________________  Annual  Supply

APPEARING CATEGORIES

☐ Part I (Reappear less than 33% marks in Part I papers) & Part II Full
☐ Part I passed and Part II Full
☐ Part I & Part II Full after matric (Fresh/Composite)
☐ Part I and Part II Full (already appeared in inter Exam P-2) with same subjects
☐ Part I OR Part II Reappear (Compartment Case)
☐ Part I and Part II Full (already appeared in inter Exam P-1 only) with same subjects

☐ Part I and Part II Full (already appeared in Inter Exam P-1 only) with new subjects
☐ Part I and Part II Full (already appeared in Inter Exam P-2) with new subjects
☐ Marks Improve in Part I only
☐ Marks Improve in Part II only
☐ Marks Improve in Part I and Part II
☐ Marks Improve in Selected Subjects

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/Guardian’s CNIC ____________________________________________

Religion  Muslim  Non-Muslim

Nationality ____________________________________________

Specialty  Blind  Handicapped  Prisoner  Board Employee

CONTACT INFORMATION

District ____________________________________________  Tehsil. ____________________________

Postal Address ____________________________________________

Father/Guardian’s Mobile No. ____________________________  Institution Contact No. ____________________________

Email Address ____________________________________________

EXAM INFORMATION

Zone ____________________________________________  Group:  Pre-Medical  Pre-Engineering  General Science  Commerce  Humanities  Others

PROPOSED CENTRE

Subjects Part I

1. ____________  2. ____________  3. ____________  4. ____________  5. ____________  6. ____________  7. ____________

Subjects Part II

1. ____________  2. ____________  3. ____________  4. ____________  5. ____________  6. ____________  7. ____________

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

(Head of Institutions affiliated with B.I.S.E, Sahiwal)

Signature & Stamp of Attesting Authority

CNIC No. ____________________________
REVENUE FORM FOR INTERMEDIATE PART (I/II) SUPPLEMENTARY EXAMINATION 2014
BOARD OF INTERMEDIATE AND SECONDARY EDUCATION, SAHIWAL

Form No.______________________  Roll No.______________________  (For Office Use only)

Challan No.__________________

Candidate’s Name (Urdu)___________________________________________

Candidate’s Name (English)___________________________________________

(USE CAPITAL LETTER)

Father’s Name (Urdu)______________________________________________

Father’s Name (English)______________________________________________

(USE CAPITAL LETTER)

Present Home Address In Urdu:_________________________________________

Group: (Science/Arts)______________________ Registration #:____________________

SUBJECTS (P-I):

1._________________  5._________________  1._________________  5._________________

2._________________  6._________________  2._________________  6._________________

3._________________  7._________________  3._________________  7._________________

4._________________  ____________________________________________

SUBJECTS (P-II):

Previous Roll No. 10th_________________ Year ______________(Annual/Supplementary)_________________ Board ______________

Deposited Fee Rs._________________ Dated_________________ HBL Branch

Candidate’s Signature (English)_________________________________________

Candidate’s Signature (Urdu)__________________________________________

One Window Stamp

Bank Stamp