



I declare that the information furnished above by me is correct to the best of my knowledge.

Place :

Date :

Signature of the candidate

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Study centre :

Checked and forwarded

Seal

Date:

Signature of the Co-ordinator of the Study Centre

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SVT:

Checked and forwarded

Seal

Date:

Signature

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KSOU

Registered by:

Signature

Verified by:

Signature