

PUNJAB SCHOOL EDUCATION BOARD

FOR MATRICULATION EXAMINATION 1st & 2nd SEMESTER SESSION 2010-11

(Particulars in this form are to be filled in by the Candidate after reading the prospectus and syllabi)
DO NOT TEAR OR MUTILATE OR FOLD THIS FORM.



For Private Candidate Only

* Tick only the appropriate box like

Male Female Religion:- Sikh Hindu Muslim Christian Others

FOR OFFICE USE ONLY

SHEET NO.
ROLL NO.
Centre Code

District Code District Name *Indian Foreigner Rural Urban *GENERAL BC
SC ST

General Category:- Full Subject Improvement Deaf & Dumb Annual Family Income in rupees:
Open School Reappear Additional Subject Handicapped Upto 30000
Blind 30001 to One Lac Above One Lac



Desired Centre Name
1. 2.
3. 4.
Signature of the Candidate In:
English
Punjabi

Name of the Candidate in English (In Capital Letters)
S A C H I N S H A R M A

Father's Name in English (In Capital Letters)
A N O O P K U M A R S H A R M A

Mother's Name in English (In Capital Letters)
S U D E S H S H A R M A

Date of Birth Date Month Year DOB in Words:

Regn. No.

Name of the Candidate (In Punjabi)
Father's Name (In Punjabi)
Mother's Name (In Punjabi)

Address:- Fee Details:-
P.O. Phone. Fee Amount in Rs
Teh. Dist. Pincode Receipt No.
Dated

(i) For Full Subjects			(ii) For Re Appear/Additional Subject Category :-			(iii) For Improvement /Open School Reappear/Blind/Deaf & Dumb/Foreigner candidates category:-		
Subject Code	Subject Name	Medium Code	Subject Code	Subject Name	Medium Code	Subject Code	Subject Name	Medium Code
<input type="checkbox"/> 01	PUNJABI OR PUNJAB HISTORY & CULTURE	<input type="checkbox"/> 1	<input type="checkbox"/>		<input type="checkbox"/>	1.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 02	ENGLISH	<input type="checkbox"/> 2	<input type="checkbox"/>		<input type="checkbox"/>	2.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 03	HINDI	<input type="checkbox"/> 3	<input type="checkbox"/>		<input type="checkbox"/>	3.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 04	MATHEMATICS	<input type="checkbox"/> 1	Xth Pass /Re-appear Roll No. _____			4.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 05	SCIENCE	<input type="checkbox"/> 1	Board _____ Session/Year _____			5.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 06	SOCIAL STUDIES	<input type="checkbox"/> 1	*If Re-appear/Improvement in Subject with Practical, Do you want to appear in Practical Examination again? Yes <input type="checkbox"/> No <input type="checkbox"/>			6.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 08	HEALTH & PHY. EDUCATION	<input type="checkbox"/> 1				7.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 63	COMPUTER SCIENCE	<input type="checkbox"/> 1	8.	<input type="checkbox"/>	<input type="checkbox"/>			
<input checked="" type="checkbox"/> 35	Agriculture Elective sub.	<input type="checkbox"/> 1						