



11. Differently abled (DA): Put tick mark ( )

(If deformity is 40% or more  
Enclose certificate)

1) Visually impaired   
3) P.H

2) Deaf, Deaf and Dumb   
4) Dyslexia

12. Identification Marks:

1.....  
2.....

13. Previous Educational Qualifications: \_\_\_\_\_  
(only passed class shall be mentioned and enclose certificate)

14. If already studied & failed in class 10<sup>th</sup> of any other Board give details:

S. No.	Enrollment No.	Year of Appearance	Name of the Board & Address	Medium	No. of subjects passed	Marks obtained
1						
2						
3						
4						

15. Transfer of Credit (TOC) of two subjects for which exemption claimed:

Subject-1:  Code  Subject-2:  Code

16. Subjects Selected for study in class 10th (HCOSE):

S. No	Group	Code No	Subject
1.	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
6.	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
7.	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>

17. Medium of Instruction:.....

18. Postal Address:

Present

Permanent

Mobile No:

**Declaration:**

I hereby solemnly affirm that all the particulars and information furnished by me in this application form are true. If any information is found false and /or if any document / enclosure is found fraudulent, I may be liable for any action by the Director, HCOSE besides canceling my admission / performance in the examination at any stage. I have carefully gone through the prospectus booklet and website of HCOSE and have become fully conversant with the eligibility conditions to be satisfied for appearing at class 10<sup>th</sup> (HCOSE) exams and I further declare that I have sufficient knowledge and I am capable of studying Class X.

Signature of School/AC Coordinator with Seal

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Full Signature of the candidate