

**CITY /DISTRICT** 

## ADMISSION FORM OSBME EXAMINATION SESSION 2022-2023

(Under the Department of School & Mass Education BBSR-Odisha)

IMPORTANT NOTICE- FILL THE FORM IN CAPITAL YOUR SUPPORTING DOC	L LETTER, USE ONLY BLUE OR BLACK BACKER BACK BACKER		
		Paste Passport Size Photo	
COURSE NAME			
APPEARING AS	REGULAR STUDENT	PRIVATE STUDENT	
NAME OF DISTRICT FOR APPEARING EXAMS			
STUDENT NAME (IN CAPITAL)			
FATHER NAME (IN CAPITAL)			
MOTHER NAME (IN CAPITAL)			
D.O.B			
PERMANENT ADDRESS			

STATE	
PIN CODE	
CORRESPONDENCE ADDRESS	
CITY /DISTRICT	
STATE	
PIN CODE	
NATIONALITY	
CONTACT NO.	
FMAIL ADDRESS	
EMAIL ADDRESS	
GENDER	M F T
GENDER	
AADHAAR CARD NO.	
COLIDAI GUID IIGI	
LAST QUALIFICATION	
LAST QUALIFICATION FROM	

SUBJECT FOR EXAMINATION	
SIGNATURE OF STUDENT	
Declaration	on by the Student
I declare that all the information filled in thi the documents attached with this form are co in the information given by me and attached	of form has been filled by me and is absolutely true. All completely original. If anything is found wrong or illegal d documents, then I will be responsible for the same, in large milling me.
	SIGNATURE OF STUDENT
	STATE BANK OF INDIA-BBSR
ACCOUNT DETAILS FOR FEE DEPOSIT	ACCOUNT HOLDER - SECRETARY OSBME
	ACCOUNT NO. 10872145701
	IFSC- SBIN000041

IMPORTANT NOTICE-DEPOSIT YOUR FEE IN ABOVE MENTIONED ACCOUNT, ATTACH FEE DEPOSITED RECEIPT WITH YOUR ADMISSION FORM, SUPPORTING DOCUMENTS SINGLE PDF AND SEND IT TO <a href="mailto:osbmeadmission@gmail.com">osbmeadmission@gmail.com</a>