





NAME	
CLASSSEC_	
ADDRESS	
TEL EMAIL	
ACHIEVEMENT DETAIL (BEST SIX), DETA	ILS TO BE ENCLOSED WITH THE FORM OVERLEAF
1.	
2	
4	
5	
OTHER INFORMATION	
ACADEMICS MARKS SECURED (IN %) IN THE LAST ANN	NUAL EXAMINATION
TO BE AWARDED BY THE CONCERNED CLASS TEACHER	
SIGNATURE OF THE CLASS TEACHER	SIGNATURE OF THE STUDENT
	TIFICATE
This is to certify that the achievement mention	ned above are true and the student had participated in the

competition with the knowledge of the school authority.

SIGNATURE OF THE TEACHER CONCERNED

Attested photocopy of the proof of achievement is submitted herewith.

SIGNATURE OF THE PRINCIPAL