



INTERNATIONAL KANGAROO SCIENCE CONTEST

in collaboration with **StemCo**

CORRECTION/REPLACEMENT FORM

INSTITUTION'S DETAILS

IKSC INSTITUTION CODE:

--	--	--	--	--

INSTITUTION'S NAME *(If correction required)*:

--

INSTITUTION'S POSTAL ADDRESS *(If correction required)*:

--

--

TEHSIL		DISTRICT	
PHONE (S)		E Mail	

OFFICIAL BANK TITLE OF THE INSTITUTION'S BANK ACCOUNT FOR HONORARIUM

(If correction required)

--

PRINCIPAL'S CONTACT DETAILS

(If correction required)

NAME			
CELL NO.		E MAIL	

COORDINATOR'S CONTACT DETAILS

(If correction required)

NAME			
CELL NO.		EMAIL	



INTERNATIONAL KANGAROO SCIENCE CONTEST

in collaboration with **StemCo**

STUDENT(S) REPLACEMENT FORM *(If required)*

S.NO.	ROLL NO.	REPLACEMENT FROM			REPLACEMENT TO		
		STUDENT'S NAME	FATHER'S NAME	CLASS	STUDENT'S NAME	FATHER'S NAME	CLASS

REMARKS: _____

SIGNATURES & STAMP
PRINCIPAL/HEAD OF THE INSTITUTION