

in collaboration with StemCo

#### **REGISTRATION FORM**

#### **INSTRUCTIONS & IMPORTANT DEADLINES:**

- I. Please fill all the columns with Black/Blue permanent ink in Capital letters only.
- II. A separate registration page (Page 04 of registration form) may be used for each participating class. (Don't register the names of students from multiple classes on one page).
- III. Minimum Participation of 10 students from a participating class is MUST. There is no maximum limit.
- IV. The last date of submitting registration form is August 28, 2024 with normal fee, after this date the institutions can register by paying late fee of Rs. 5,000 (per institution) till August 30, 2024 and by paying double late fee of Rs. 10,000 (per institution) till August 31, 2024. Thereafter no registration will be accepted.
- V. The Contest will be held on Thursday, September 12, 2024 (10:00 AM)
- VI. The participation fee is **Rs. 1100/-** per participant, which can be paid through Bank Draft/Pay Order, drawn in favour of **CREATIVE LEARNING SERVICES**.

OR

The fee can also be directly transferred to our A/C: CREATIVE LEARNING SERVICES, A/C No: 33001008904151, IBAN: PK03 ALFH 0033 0010 0890 4151, Bank Name: BANK ALFALAH, Branch: H-BLOCK, DHA, PHASE - I, LAHORE.

- VII. The registration fee once paid is non-refundable and non-transferable.
- VIII. The registration forms complete in all respects should be sent to the following Postal Address:

### CREATIVE LEARNING SERVICES

International Kangaroo Science Contest 2024 1st Floor, G-2, Commercial Area, Phase - I Defence Housing Authority, Lahore Cantt. 54792 Phone: +92-42-35744666, +92-42-35692728

IX. All particulars in the registration form must be filled as illustrated below. Variation from the format can result in the rejection of registration.

S.NO.	STUDENT'S NAME	FATHER'S NAME				
1	HASSAN BIN WALEED	WALEED AHMED MASHWANI				

For any further assistance, you can contact Creative Learning Services:

Email: info.iksc@kangaroo.org.pk.

**Office**: +92-42-35744666, +92-42-35692728.

Cell: +92-321-8882252, +92-324-4219999, +92-321-9311119.



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1. INSTITUT	TION'S DE IKSC INS	TAILS TITUTION CODE: (Last Year's 5 digits Unique Institution Code for IKSC)				
INSTITUTION'S NAME:						
INSTITU	TION'S PO	STAL ADDRESS:				
Tehsil						
District						
Phone (s)						
Fax						
Email						
OFFICIAL T	ITLE OF T	HE INSTITUTION'S BANK ACCOUNT FOR HONORARIUM				
2. PRINCI	PAL'S COI	NTACT DETAILS (FIRST CONTACT)				
First Nam	е					
Middle Nar	ne					
Last Name	!					
Cell No.						
Office Phor	ne No.					
Email						
		CONTACT DETAILS (SECOND CONTACT) Imminate an official to coordinate and to correspond in the absence of Principal.				
First Nam						
Middle Nar						
Last Name	<u></u>					
Cell No.						
Office Phor	ne No.					
Email						
A	CCOUNT T	ITLE FOR COORDINATOR'S CASH AWARD (if no. of students 101 or above)				
4. CONTEST OPTIONS (Please tick any one):						
	Paper I	Based Online				



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5. DETAILS OF REGISTERED STUDENTS (Class-wise summary of students to be registered):

LEVEL		CLASS	NO. OF STUDENTS (in figures)		
PRE	01	ONE			
ECOLIER	02	TWO			
ECOLIER	03	THREE			
ECULIER	04	FOUR			
BENJAMIN	05	FIVE			
BENJAMIN	06	SIX			
CADET	07	SEVEN			
CADET	08	EIGHT/O LEVEL-I			
JUNIOR	09	NINE/O LEVEL-I & II			
JUNIUR	10	TEN/O LEVEL-II & III			
STUDENT	11	ELEVEN/O LEVEL-III & A LEVEL-I			
STUDENT	12	TWELVE/A LEVEL-I & II			

#### 6. UNDERTAKING

I hereby certify that:

- 1. I undertake the full responsibility to act as a Chief Examiner for the paper based and online rounds of IKSC 2024 and to conduct the exam following the IKSC code of conduct and by making all necessary examination arrangements at our institution maintaining the international standards and ensuring the secrecy & transparency of the written test.
- 2.1 also assure that my institution will fully abide by IKSC code of conduct, all rules, regulations and instructions of the IKSC being enforced time to time.

5. I	also	certify	that	I have	enclosed	Deposit	Slip/Bank	Draft	:/Pay	Order	ın	original	bear	ing	No:
_				d	ated:		amountii	ng to	Rs.	(in figu	res)			as	s a
r	egistra	ition fee	for to	otal nun	nber of	stude	ents as me	ntione	d in	above s	umn	nary <b>@</b>	Rs. 1	100	per
9	student	in favou	ır of C	<b>REATIV</b>	E LEARN	ING SER	RVICES.								

### Deposit Slip/Bank Draft/Pay Order in original PLEASE ATTACH HERE

A/C Title: CREATIVE LEARNING SERVICES NTN: B408028

A/C No: **33001008904151** 

IBAN: PK03 ALFH 0033 0010 0890 4151

Bank Name: BANK ALFALAH, Branch: H-BLOCK, DHA, PHASE - I, LAHORE.

SIGNATURES & STAMP
PRINCIPAL /HEAD OF THE INSTITUTION



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#### STUDENTS REGISTRATION SHEET

FOR THE CLASS\_\_\_\_

A separate registration page may be used for each participating class. Don't register the names of students from multiple classes on one page. Please fill the particulars of students very carefully according to your institution's office record using capital letters. These particulars will appear on the certificates/mark sheets. Any change requested therein after the issuance of result/certificates will be subject to the payment of a fee of Rs. 1,500 per document.

S.NO.	STUDENT'S NAME	FATHER'S NAME