

CREATIVE LEARNING

CORRECTION/REPLACEMENT FORM

IKSC INSTITUTION CODE:

INSTITUTION'S NAME

(If correction required):

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INSTITUTION'S POSTAL ADDRESS

(If correction required):

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| TEHSIL | |
| DISTRICT | |
| PHONE (S) | |
| FAX | |
| E MAIL | |

OFFICIAL TITLE OF THE INSTITUTION'S BANK ACCOUNT FOR HONORARIUM

(If correction required):

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CLASS WISE SUMMARY OF STUDENTS TO BE REGISTERED

(If correction required):

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

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

| S.NO. | ROLL NO. | STUDENT'S NAME | FATHER'S NAME | CLASS (If change) |
|-------|----------|----------------|---------------|----------------------|
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REMARKS: _____

SIGNATURES & STAMP
PRINCIPAL /HEAD OF THE INSTITUTION

CREATIVE LEARNING

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 |
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REMARKS: _____

SIGNATURES & STAMP
PRINCIPAL/HEAD OF THE INSTITUTION