CORRECTION/REPLACEMENT FORM

INSTITUTION'S DETAILS

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

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

TEHSIL	
DISTRICT	
PHONE (S)	
E Mail	

Class Wise Summary of Students to be registered (*If correction required*):

HIPPO CATEGORY	CLASS		NO. OF STUDENTS (in figures)
LITTLE HIPPO	01	ONE	
	02	TWO	
HIPPO 1	03	THREE	
	04	FOUR	
HIPPO 2	05	FIVE	
	06	SIX	
HIPPO 3	07	SEVEN	
	08	EIGHT/O LEVEL-I	
HIPPO 4	09	NINE/O LEVEL-I & II	
	10	TEN/O LEVEL-II & III	
HIPPO 5	11	ELEVEN/O LEVEL-III & A LEVEL-I	
	12	TWELVE/A LEVEL-I & II	
TOTAL NO. OF STUDENTS			

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

S.NO.	ROLL NO.	STUDENT'S NAME	FATHER'S NAME	DATE OF BIRTH	CLASS

REMARKS: _____

SIGNATURES & STAMP
PRINCIPAL /HEAD OF THE INSTITUTION

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