



The Jammu and Kashmir State Board of School Education, Srinagar / Jammu

APPLICATION FORM FOR DATE OF BIRTH CERTIFICATE

- a. Name of the Applicant: _____
(In Capital Letters)
- b. Father's Name: _____
(In Capital Letters)
- c. Mother's Name: _____
(In Capital Letters)
- d. Registration No: _____
- e. Address for Correspondence: _____

- f. Permanent Address: _____
- g. Contact Nos.: Cell No. _____ e-mail _____
- h. Other Information (Examination Appeared and details thereof):

Applicant must affix here her/his Latest Passport size digital photograph which shall be attested by the Head of the Concerned School

S.No.	Roll No.	Examination	Session	Year	Result	Board/University through which Appeared

i. Particulars as recorded in the BOSE Records:

S.No.	Particulars	As Recorded in the BOSE Records
i.	Applicant's Name	
ii.	Father's Name	
iii.	Mother's Name	
iv.	Date of Birth	
v.	Caste	
vi.	Sub-Caste	

- j. Name of the Institution lastly registered with: _____
- k. Reason's for Migration: _____

l. Prescribed Fee of Rs. _____ Deposited Vide Bank Slip No. _____ Dated _____

m. I _____ (the applicant) undertake that the certificate of Date of Birth applied for is based upon genuine reasons, the information furnished by me in this Form is correct. Nothing has been concealed or Presented in a fabricated form. In the event, the furnished information is found incorrect; the BOSE shall have the authority to take decision which shall be final, acceptable to me and a binding upon me.

Dated: _____

Signature of the Applicant

**For Verification And Attestation
of
The Head of the Concerned School.**

This is to Certify that _____
Daughter of / Son of _____
R/o _____ was on Roll in our
Institute upto _____ Her/His Parents were verified by
relevance of the available record and were found correct. The Date of Birth Certificate applied for by
the Applicant may be considered on merits as per prescribed regulations. This case is accordingly
forwarded to the Joint Secretary, Certificates, BOSE, Kashmir Division for favour of further necessary
action in this regard.

**Seal and Signature
of the Head of the School.**

Place: _____

Date: _____

Name: _____

Designation: _____