	ita Hapankam tition 2019		80) mD mD					
Appli	cation 1	JE B						
Title .								
Name of the Student								
Name to be printed on the Certificate (In block capitals)								
Grade G	rite "X" in the relevant cage) rade \Box Grade - 4 -5 \Box 6 - 7 - 8	Grade 9 - 10 - 11	Grade 12 & 13					
School								
Postal Address								
Contact Number (Home) Contact Number (School)		(Mobile)						
Confirmation of the paren	nt/ guardian							

I certify that the painting was done by my child.

Name

Signature

Recomandation of the school

I certify that the painting was done by the above named student.

Signature of the Class Teacher/ Art Teacher

Signature of the School Principal

Certification of the NSB Branch Manager / Post Master (Optional)

Account Number of the Student									
Branch									

Signature of the Branch Manager / Post Master (On official rubber stamp)

Fill this application and paste on the other side of the painting