



COUNCIL OF HIGHER SECONDARY EDUCATION ODISHA BHUBANESWAR

APPLICATION FOR ISSUE OF MARK SHEET

(USE CAPITAL LETTER)

To

**The controller of Examination
Council of Higher Secondary Education
Odisha, Bhubaneswar**

Sir,

I furnish below particulars about myself and request that a Marksheet may kindly be issued in my favour, for which an amount of Rs. _____ (Rupees _____) only has been paid by me vide cash receipt No./ B.D.R. No. _____ Dated _____ which is attached here with.

1. Name of the Candidate _____
2. Name of the Father _____
3. Name of the Mother _____
4. Examination Roll No. _____
5. Registration No. _____
6. Name of the Examination Year & Month _____
7. College or H.S. School from which appeared _____
8. Subjects offered by the Candidate _____

Compulsory

Optionals

Extra Optional (if any)

1. _____ 1. _____ 1. _____

2. _____ 2. _____

3. _____

9. Pass/Fail (If Passed mention the division) _____

10. Result of the Candidate

(Fresh/With-held/Revised/M.P) _____

Date : _____

Signature of the applicant in full

Signature of D.A.

N.B : 1. (a) Fees Rs. 25 (Normal)
(b) Fees Rs. 35 (Urgent)