Application for Study Centre

То

The Chairman, BSE SIKKIM.

Subject: Regarding Study Centre.
Sir, We want study center for our institute / school/ college / academy . We understood and read carefully all rules and regulations, terms and conditions and we accept them. The details of our institute / school / college / academy as under:-
Name of the institute / school / College / Academy
2. Regd. No. if registered (Copy also attach)
3.FullAddress :
DisttStateState
PhonePin Code
E-mail Website (If any
4. Detail of the Authorized person (Nodal Officer) of institute / school/ college / academy who
will work with the Board on the behalf of the institute/school/College:
Name: (Nodal Officer)Father name:
Mother name:Date of birth
Full.address:
I here by declare that the above information is true.
Dated.
Signature and Seal(NODELOFFICER)