|  | AN STATE BOA            |                               |                               |  |  |  |  |
|--|-------------------------|-------------------------------|-------------------------------|--|--|--|--|
| 🚺 🖉 राजस्था  | न स्टेट बोर्ड अ         | ॉफ ओपन स्कृ                   | ूलिंग                         |  |  |  |  |
| [Recognized by Government of Rajasthan]  |                         |                               |                               |  |  |  |  |
| (An ISO Certified Organization)  |                         |                               |                               |  |  |  |  |
| Application form for Admission to Class <sup>th</sup> 10 (RSBOS)<br>*Before filling up the Application form read the instructions in the Prospectus carefully. |                         |                               |                               |  |  |  |  |
| (To be filled by School/AC Coordinator as p  |                         | •                             | •                             |  |  |  |  |
| School/AC Code No:   |                         | Admission No.                 |                               |  |  |  |  |
| Fee Particulars:   | Admission Fee           | Othor Eco. if                 | Total Fee                     |  |  |  |  |
| Application cum<br>Registration  | (in Rs.)                | Other Fee, if<br>any (in Rs.) | (in Rs)                       |  |  |  |  |
|  |                         |                               |                               |  |  |  |  |
|  | BOARD                   |                               |                               |  |  |  |  |
|  | To be filled by the can | didate                        |                               |  |  |  |  |
| 1. Name of the Affiliated Institution  | with Address:           |                               |                               |  |  |  |  |
|  |                         |                               | Paste Latest<br>Passport Size |  |  |  |  |
|  |                         |                               | Photograph<br>(Color)         |  |  |  |  |
| 2. Name of the Candidate in full (in Block Letters) :  |                         |                               |                               |  |  |  |  |
|  |                         |                               |                               |  |  |  |  |
| Last Name:   |                         |                               |                               |  |  |  |  |
|  |                         |                               |                               |  |  |  |  |
| First Name:  |                         |                               |                               |  |  |  |  |
|  |                         |                               |                               |  |  |  |  |
| 3. Father's Name: Even married woman also should enter only Father's Name  |                         |                               |                               |  |  |  |  |
|  |                         |                               |                               |  |  |  |  |
| 4. Mother's Name:  |                         |                               |                               |  |  |  |  |
| Item No. 5 & 6 Put tick mark (   | $\downarrow$            |                               |                               |  |  |  |  |
| 5. Sex: Male Female  | 6. Marital Statu        | us: Married Uni               | married                       |  |  |  |  |
| 7. Date of Birth in  | Date                    | Month                         | Year                          |  |  |  |  |
| Figures  |                         |                               |                               |  |  |  |  |
|  |                         |                               |                               |  |  |  |  |
| 8. Community: UR<br>Put tick mark ( $$ )   | OC BC OBC               | C SC ST                       | Minority                      |  |  |  |  |
| (MRO Certificate to  |                         |                               |                               |  |  |  |  |
| be enclosed) (a) Name of the Sub caste in case of Other than OC :  |                         |                               |                               |  |  |  |  |
| 9. Annual Family Income: Rs  |                         |                               |                               |  |  |  |  |
| · · · · · · · · · · · · · · · · · · ·  |                         | <b>.</b>                      |                               |  |  |  |  |
| 10. Nationality: Religio   | on: State:              | Mother Ton                    | gue:                          |  |  |  |  |

| 11. Differently abled<br>(If deformity is<br>Enclose certifi | 40% or more          | 1) Visually imp                  |               | ) Deaf, Deaf and Du<br>) Dyslexia | imb      |
|--|----------------------|----------------------------------|---------------|-----------------------------------|----------|
| 12. Identification Mar                                       | ,                    | 5) F.H                           | L 4           | ) Dysiexia                        |          |
|  |                      |                                  |               |                                   |          |
|  |                      |                                  |               |                                   |          |
|  |                      |                                  |               |                                   |          |
| 13. Previous Education (only passed class sh                 |                      |                                  | ato)          |                                   |          |
| (only passed class sh  |                      |                                  | ale)          |                                   |          |
| 14. If already studied                                       | & failed in class    | 10 <sup>th</sup> of any other Bo | ard give deta | ils:                              |          |
| S. Enrollment  | Year of              | Name of the Board                | Medium        | No. of subjects                   | Marks    |
| No. No.  | Appearance           | & Address                        |               | passed                            | obtained |
| 2  |                      |                                  |               |                                   |          |
| 3  |                      |                                  |               |                                   |          |
| 4  |                      |                                  |               |                                   |          |
| 15. Transfer of Credit                                       | (TOC) of two su      | ubjects for which exe            | mption claime | ed:                               |          |
|  |                      |                                  |               |                                   |          |
| Subject-1:   | Code                 | Subje                            | ect-2:        | Code                              |          |
| 16. Subjects Selected  | l for study in cla   | ss 10th (RSBOS):                 |               |                                   |          |
| S. No Group  | Code N               | 0                                |               | Subject                           |          |
| 1.   |                      |                                  |               | 22                                |          |
| 2.   |                      |                                  |               |                                   |          |
| 3.   | $\geq$ $\Box$        |                                  | 4             | 5                                 |          |
| 4.   |                      |                                  |               |                                   |          |
| 5.   |                      |                                  |               |                                   |          |
| 6.   |                      |                                  |               |                                   |          |
| 7.   |                      |                                  | Para .        |                                   |          |
|  |                      |                                  |               |                                   |          |
| 17. Medium of Instruc  | e <mark>tion:</mark> |                                  |               |                                   |          |
| 18. Postal Address:  | Presen               | t Y C D (                        | 15            | Permanent                         |          |
|  |                      |                                  |               |                                   |          |

Mobile No:

Declaration:

I hereby solemnly affirm that all the particulars and information furnished by me in this application form are true. If any information is found false and /or if any document / enclosure is found fraudulent, I may be liable for any action by the Director, (RSBOS) besides canceling my admission / performance in the examination at any stage. I have carefully gone through the prospectus booklet and website of (RSBOS) and have become fully conversant with the eligibility conditions to be satisfied for appearing at class 10<sup>th</sup> (RSBOS) exams and I further declare that I have sufficient knowledge and I am capable of studying Class X.