Affiliated with **J&KBOSE** Order No. - **19 - GEN OF 2020**

Recognition: **G.O. No. 209-Edu of 2020**

Jamiat-un-Noor
SOIBUGH BUDGAM KASHMIR

جامعۃ النور
سویہ بگ بڈگام

+91 **91038 30055** | +91 **70063 52008**

Roll No. [to be alloted by the office] _____

ENTRANCE TEST FORM

Class to which admission is sought [داخلہ مطلوبہ درجہ]: _____

Name - [in Capital Letters] [طالبہ کا نام]: _____

Father's Name [والد کا نام]: _____

Mother's Name [والدہ کا نام]: _____

Village [ساکنہ]: _____ Tehsil [تحصیل]: _____

District [ضلع]: _____ Province [صوبہ]: _____

Date of Birth [یوم پیدائش]: _____

Contact Numbers: (1) _____ (2) _____

ADMIT CARD

Examination Roll No.: _____

Superintendent:

Kindly allow Miss _____

D/O _____

R/O _____ Tehsil _____ District _____

to sit in the examination.

Controller Examination