

**CLASS: 10 CONFIRMATION FORM  
ICSE - 2022 EXAMINATION**

ID. No. \_\_\_\_\_/\_\_\_\_\_

Class: 10 Sec. \_\_\_\_\_ Roll No. \_\_\_\_\_

Science / Commerce (Please Tick)

Date: \_\_\_\_\_

From: (Name & Address of Father / Mother)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone No: \_\_\_\_\_

Whatsapp No. \_\_\_\_\_

To  
The Principal,  
Rose Bud School,  
Liluah, HOWRAH

Dear Sir,

This is to request you to send up my son's/daughter's name for the **ICSE 2022 Examination**. His /Her name may be withdrawn from this examination if he/she does not qualify for it at the Final Selection Examination conducted in the school in Class - 10 or any other reason.

Name \_\_\_\_\_

(In **BLOCK letters**, as given in the Class - 9 ICSE Registration Card)

Date of Birth         UID NO. \_\_\_\_\_

Date

Months

Year

Aadhar No.

Mother's Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Guardian's Name: \_\_\_\_\_

OBC/SC/ST/Other: \_\_\_\_\_ Religion; \_\_\_\_\_ Sex. \_\_\_\_\_, Nationality \_\_\_\_\_

**Declaration**

We declare that the Information of the candidate entered on this form is correct, and that the documents submitted and facts stated are true and correct, and that no part of the documents is false and nothing is concealed herein.

\_\_\_\_\_  
Signature of Father

\_\_\_\_\_  
Signature of Mother

\_\_\_\_\_  
Signature of Students