



# SCHOOL STUDENT'S EXAMINATION CENTER (SSEC)

A Unit of **GODS TRUST**

(Regd. U/s. 12A & 80G of Income Tax Act, 1961. Dept. of Income Tax, Govt. of India., NITI Aayog, Govt. of India., National Human Rights Commission, Govt. of India., VIPNET, Dept. of Science & Technology, Govt. of India.)  
(Head Office: Plot no- 1089, Bomikhal, GGP Canal road, Near Bhagabat Sandhan, Bhubaneswar - 10, ODISHA.  
Web Site: [www.godstrust.co.in](http://www.godstrust.co.in). Email ID: [godstrustssec@gmail.com](mailto:godstrustssec@gmail.com) Contact No: 9938506875)

## Admission Form

<b>Name of the Student:</b>																				

Affix  
Passport Size  
Color Photo

<b>Aadhar Card No:</b>																				
------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

<b>Date of Birth</b>																				
----------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

<b>Mobile No:</b>																				
-------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

<b>Father's /Mother's/Guardian's Name:</b>																				

<b>Name of the School :</b>																				

<b>Email ID</b>																				
-----------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

<b>Sex</b>	Male		Female	
------------	------	--	--------	--

<b>Class</b>	7th		8th		9th		10th	
--------------	-----	--	-----	--	-----	--	------	--

<b>Subject</b>	Science		Mathematics	
----------------	---------	--	-------------	--

### Address:

Plot/House No:																				
City/Town:																				
Block/Village:																				
District:																				
State:																				

<b>Admission Fees</b>	Rs. 2500/-
-----------------------	------------

<b>Science Examination Fees</b>	Rs. 7500/-	
---------------------------------	------------	--

<b>Mathematics Examination Fees</b>	Rs. 7500/-	
-------------------------------------	------------	--

**Declaration:** I certify that the information I am about to provided is true and complete to the best of my knowledge.

**PLACE:** \_\_\_\_\_

**DATE:** \_\_\_/\_\_\_/\_\_\_\_\_

**Signature of Student**