

**Goa Board of Secondary & Higher Secondary Education
Alto - Betim, Goa**

APPLICATION FORM FOR VERIFICATION OF MARKS IN ABSENTIA

S.S.C/ H.S.S.C., Examination of March / July / October 200 _____

To,
The Secretary,
Goa Board of Secondary & Higher Secondary Education,
ALTO, BETIM - GOA.

Sir

I hereby request for verification of my answerbook/s of S.S.C./ H.S.S.C. Examination of March/ July/October 200 _____

- 1) An amount of Rs. _____ by cash / cross D.D. No. _____
_____ dated _____ of _____ Bank and
- 2) An attested copy of mark-sheet has been enclosed.

The verification of marks is required to be done in the following subjects.

Subject in which verification is sought	Marks obtained by the candidate in the subjects in which verification is sought			Language in which the paper is answered
	Theory	Practical	Total	
1. _____				
2. _____				
3. _____				
4. _____				
5. _____				
6. _____				

1. Name in full _____
2. Examination Centre : _____ Seat No.: _____
3. Full Post Address _____

4. Contact Tel. No. _____

Signature of the candidate

ENDORSEMENT BY THE INSTITUTION

Submitted through this Institution

The Candidate has submitted his/ her original passing certificate-cum-marksheet/ marksheet Index No. _____

Date: _____

School Stamp

Signature of the head of the Institution

RECEIPT

Original Passing Certificate - cum- marksheet/ marksheet of S.S.C./H.S.S.C. issued by the Board of Shri/ Smt./Kum. _____ has been submitted to this office as he/she has applied for verification of marks.

Date _____

Place _____

School Stamp

Signature

Head of the Institution

- Note:** 1) Candidates shall contact the Board's office 15 days after submission of application for confirming the date of verification
2) This receipt shall be preserved by the candidate till the receipt of report of verification of marks and be produced to the Head of the Institution while seeking it back.