



**STATE COUNCIL FOR OPEN AND LIFELONG EDUCATION-KERALA  
DIPLOMA IN COMPUTER APPLICATION (DCA) EXAMINATION-20....**

**APPLICATION FOR DCA EXAMINATION**

*Affix a recently  
taken passport size  
photo (attested by  
the School  
Principal)*

1. Name of Study Centre		2 Centre Code	
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3. Name of Examination Centre		4. Centre Code	
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5. Admission No.		6. Year of Admission	
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7. Register No., Month and Year of passing SSLC		
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8. Name of the Candidate (Block letters as in SSLC)	English	
	Malayalam	

9. Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	10. Religion		11. Caste	
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12. Whether belongs to:	<input type="checkbox"/> SC	<input type="checkbox"/> ST	<input type="checkbox"/> OBC	<input type="checkbox"/> OEC	<input type="checkbox"/> Others
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13. Date of Birth	<i>In figure</i>	
	<i>In words</i>	

14. Postal Address of the Candidate							
Phone No.	Pin Code						
	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						

15. Papers appearing now ( <i>Specify the subjects</i> )	
<b>Paper</b>	
<b>Code</b>	<b>Name</b>
1.	
2.	
3.	
4.	
5.	

16. Details of previous attempt (Supplementary Candidates only)- Theory				
Reg.No	Month & Year	Paper		
		Code No.	Name	Marks Obtained

17. Details of previous attempt (Supplementary Candidates only)- Practical				
Reg.No	Month & Year	Paper		
		Code No.	Name	Marks Obtained

18. Details of examination fee remitted

**Online**

Payment ID	Date of payment	Fees Remitted

**DECLARATION**

I hereby declare that the details furnished above are correct.

*Name and Signature of the Candidate:* \_\_\_\_\_ *Name and Signature of Father/ Guardian :* \_\_\_\_\_

*Place :* \_\_\_\_\_

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

**CERTIFICATE**

Certified that the details furnished by the candidate is verified with the office records and found correct.

*Name and Signature of the Co-ordinating Teacher:* \_\_\_\_\_ *Name and Signature of the Principal* \_\_\_\_\_

*Place:* \_\_\_\_\_

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

(Office Seal)

*(Attach copy of SSLC or equivalent certificate, mark sheets of previous attempts)*



**STATE COUNCIL FOR OPEN AND LIFELONG EDUCATION-KERALA**  
**DIPLOMA IN COMPUTER APPLICATION (DCA) EXAMINATION, 20...**

**APPLICATION FOR CONDONATION - SHORTAGE OF ATTENDANCE**

1. Name of Study Centre:	Centre Code :		
2. District of Study Centre:			
3. Name of the candidate as per the Admission Register [ <i>in block letters</i> ]	:		
4. Postal address of the candidate as per the Admission Register :			
5. Total No. of working hours during the academic year:			
6. No. of hours present:		7. No. of hours absent:	
8. Minimum percentage of attendance prescribed			
9. Percentage of hours for which condonation is required			
10. Reason for absence			
11. Particulars of condonation fee remitted (online)			
<b>Payment ID</b>	<b>Date of payment</b>	<b>Fees Remitted</b>	

*Signature of the candidate*

**RECOMMENDATION OF THE PRINCIPAL**

Certified that timely application for leave was made and leave has been granted.  
Condonation may be permitted.

*Place:*  
*Date:*

*Name and Signature of the Principal*

*(Office Seal)*