



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				
3. Name of Examination Centre		4. Centre Code				
5. Admission No.	6. Year of Admission					
7. Register No., Month and Year of passing SSLC						
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	
12. Whether belongs to:	<input type="checkbox"/> SC	<input type="checkbox"/> ST	<input type="checkbox"/> OBC	<input type="checkbox"/> OEC	<input type="checkbox"/> Others	
13. Date of Birth	<i>In figure</i>					
	<i>In words</i>					
14. Postal Address of the Candidate						
	Phone No.	Pin Code				
15. Papers appearing now (<i>Specify the subjects</i>)						
Paper						
Code			Name			
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

Offline

Chalan No.	Date of remittance	Fees Remitted	Name of Post Office

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)***