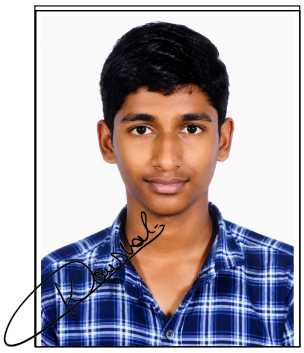
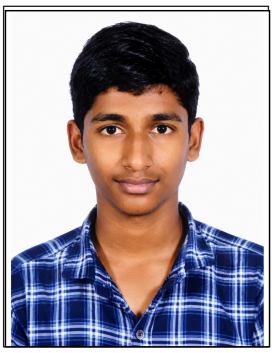


FORM NO. 93

[See rule 158]

Application for Allotment of Permanent Account Number

[For an Individual being a Citizen of India]



Sr. No.	PART A - Personal Information

1. A. Name

First Name	VEMULAPALLI
Middle Name	KOUSHAL SRI
Last Name	SAI

B. Name *(as per Aadhaar)*

VEMULAPALLI KOUSHAL SRI S
AI

2. Gender *(select one)* ☑ Male ☐ Female ☐ Transgender

3. Date of Birth 24 12 2007

4. Aadhaar Number 799370959300

5. Residence Address

Flat/Door/Building	HOUSE NUMBER 4-43-5
Road/Street/Block/Sector	EEDARAVARI VARI VEEDHI,
Post Office	ITANAGAR
Area/Locality/Town/City	TENALI
District	GUNTUR

State/Union Territory: ANDHRA PRADE Country/Region: INDIA PIN / ZIP CODE: 522201

6. Office Address

Flat/Door/Building	
Road/Street/Block/Sector	
Post Office	
Area/Locality/Town/City	
District	

State/Union Territory: Country/Region: PIN / ZIP CODE:

7. Residential Status *(select one as applicable)* ☑ Resident ☐ Non Resident ☐ Resident but Not ordinarily Resident

8. Passport Number *(mandatory for (i) Non Resident (ii) Resident but not ordinarily resident)*

9. Taxpayer Identification Number *(TIN) in the Country of Residence (if any)*

10. Contact Details

(i) Mobile Number — Country Code: 91 — Mobile Number: 6302313476

(ii) Email ID: vemulapallikoushal277@gmail.com

(iii) Landline No. with STD Code *(if any)* — STD Code: Landline Number:

PART B- Source of Income

11. Source of Income *(select one or more)*

☐ Salary ☐ Income from Business/Profession ☐ Income from House Property
☐ Capital Gains ☑ Income from Other Sources ☐ No Income

PART C - Details of Parents

12. Whether mother/father is a single parent? *(select one)* ☐ Yes ☑ No

13. Father's First Name	VEMULAPALLI
Father's Middle Name	VEERAVENKATA
Father's Last Name	PRASAD

14.	**Mother's First Name**	V E J A N D L A
	Mother's Middle Name	
	Mother's Last Name	N E E L I M A

15. **Name of parent to be printed on Permanent Account Number card** *(select one)* ☑ Father ☐ Tick Mother

PART D - Assessing Officer (AO Code)

16. **Assessing Officer** (AO Code)
(i) Area Code: A P R
(ii) AO Type: C
(iii) Range Code: 7 8
(iv) AO No.: 1

PART E- Representative Assessee, if applicable

17. **RA's First Name**
RA's Middle Name
RA's Last Name

18. **Permanent Account Number** *(if any)*

19. **Aadhaar Number** (*if Permanent Account Number is not available*)

20. **Representative Assessee Address**
Flat/Door/Building
Road/Street/Block/Sector
Post Office
Area/Locality/Town/City
District
State/Union Territory | Country/Region | PIN / ZIP CODE

21. **Contact Details**
(i) Mobile Number — Country Code | Mobile Number
(ii) Email ID
(iii) Landline No. with STD Code (*if any*) — STD Code | Landline Number

Part F: Communication Address

22. **Address for Communication** *(select one)* ☑ Residence Address ☐ Tick Representative Assessee Address ☐ Tick Office Address

Part G: Declaration by Applicant or by Representative Assessee on behalf of the Applicant

23. **Documents submitted as Proof of Identity, Proof of Address and Proof of Date of Birth of the Applicant**
☑ (i) Proof of Identity ☑ (ii) Proof of Address ☑ (iii) Proof of Date of Birth

24. **Documents submitted as Proof of Identity, Proof of Address of Representative Assessee**
☐ Tick (i) Proof of Identity ☐ Tick (ii) Proof of Address

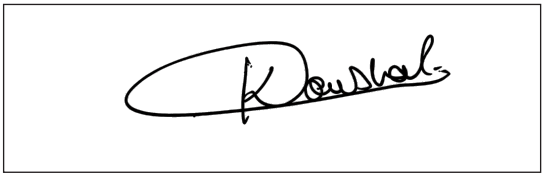
Verification & Declaration

a. I, VEMULAPALLI KOUSHAL SRI SAI……, in the capacity of SELF……(Self/ Representative Assessee) do hereby declare that what is stated above is true to the best of my knowledge and belief.

b. I declare that the applicant does not possess Permanent Account Number and shall be liable for legal consequences under Income-Tax Act, 2025 if this declaration is found to be incorrect

Place. GUNTUR

Date. 06/07/2026



(Signature /Left Hand Thumb Impression of Applicant or Representative Assessee)

Name: VEMULAPALLI KOUSHAL SRI SAI

Designation: AUTHORIZED PERSON

భారత ప్రభుత్వం
Government of India

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

ఎన్‌రోల్‌మెంట్/ Enrolment No.: 2052/70010/24907

To
వేములపల్లి కౌశల్ శ్రీ సాయి
Vemulapalli Koushal Sri Sai
S/O: Vemulapalli Veera Venkata Prasad
House Number 4-43-5
eedaravari Vari Veedhi
Near Ganganamma Temple
Itanagar
Tenali
Guntur Andhra Pradesh - 522201
6302313476

Signature valid

మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

7993 7095 9300

VID : 9151 1850 9134 5420

నా ఆధార్, నా గుర్తింపు

భారత ప్రభుత్వం
Government of India

ఆధార్

వేములపల్లి కౌశల్ శ్రీ సాయి
Vemulapalli Koushal Sri Sai
పుట్టిన తేదీ/DOB: 24/12/2007
పురుషుడు/ MALE

Issue Date: 24/01/2013

7993 7095 9300

VID : 9151 1850 9134 5420

నా ఆధార్, నా గుర్తింపు

23069418

ಕರ್ನಾಟಕ ಸರ್ಕಾರ
GOVERNMENT OF KARNATAKA

Z1AS81512

159341006

ಕರ್ನಾಟಕ ಶಾಲಾ ಪರೀಕ್ಷೆ ಮತ್ತು ಮೌಲ್ಯನಿರ್ಣಯ ಮಂಡಲಿ, ಬೆಂಗಳೂರು
Karnataka School Examination and Assessment Board, Bengaluru

ಅಂಕಪಟ್ಟಿ ಹಾಗೂ ಪ್ರಮಾಣ ಪತ್ರ / Marks Statement cum Certificate

ಈ ಕೆಳಗೆ ನಮೂದಿಸಿರುವ ಅಭ್ಯರ್ಥಿಯು ಎಸ್.ಎಸ್.ಎಲ್.ಸಿ. ಪರೀಕ್ಷೆಯಲ್ಲಿ ತೇರ್ಗಡೆಯಾಗಿರುವುದನ್ನು ಪ್ರಮಾಣೀಕರಿಸಿದೆ.
This is to certify that the below mentioned candidate has passed S.S.L.C. Examination.

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Register No. : **20230474699**	ವರ್ಷ / Year : **MARCH/APRIL - 2023**
ಶಿಕ್ಷಣ ಮಾಧ್ಯಮ / Medium of Instruction : **ENGLISH**	ಅಭ್ಯರ್ಥಿ ವಿಧ / Candidate Type : **CCE REGULAR FRESH**

ಅಭ್ಯರ್ಥಿಯ ಹೆಸರು / Candidate's Name : **VEMULAPALLI KOUSHAL SRI SAI**

ತಂದೆಯ ಹೆಸರು / Father's Name : **V V V PRASAD**

ತಾಯಿಯ ಹೆಸರು / Mother's Name : **V NEELIMA**

ಜನ್ಮ ದಿನಾಂಕ / Date of Birth : **24-12-2007 TWENTY-FOURTH - DECEMBER - TWO THOUSAND SEVEN**	ಲಿಂಗ / Gender : **BOY**

ಭಾಗ – ಎ / PART - A

ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು SCHOLASTIC SUBJECTS	ಆಂತರಿಕ ಮೌಲ್ಯಮಾಪನ INTERNAL ASSESSMENT		ಬಾಹ್ಯ ಪರೀಕ್ಷೆ EXTERNAL EXAMINATION			ಒಟ್ಟು ಅಂಕಗಳು TOTAL MARKS			
	ಗರಿಷ್ಠ ಅಂಕಗಳು MAX. MARKS	ಗಳಿಸಿದ ಅಂಕಗಳು MARKS OBTAINED	ಗರಿಷ್ಠ ಅಂಕಗಳು MAX. MARKS	ಕನಿಷ್ಠ ಅಂಕಗಳು MIN. MARKS	ಗಳಿಸಿದ ಅಂಕಗಳು MARKS OBTAINED	ಗರಿಷ್ಠ ಅಂಕಗಳು MAX. MARKS	ಕನಿಷ್ಠ ಅಂಕಗಳು MIN. MARKS	ಒಟ್ಟು ಅಂಕಗಳು TOTAL MARKS	ಶ್ರೇಣಿ GRADE
ಪ್ರಥಮ ಭಾಷೆ / FIRST LANGUAGE **ENGLISH**	25	**23**	100	35	**36**	125	44	**59**	**C**
ದ್ವಿತೀಯ ಭಾಷೆ / SECOND LANGUAGE **KANNADA**	20	**19**	80	28	**50**	100	35	**69**	**B**
ತೃತೀಯ ಭಾಷೆ / THIRD LANGUAGE **HINDI**	20	**19**	80	28	**56**	100	35	**75**	**B+**
ಗಣಿತ / MATHEMATICS	20	**19**	80	28	**49**	100	35	**68**	**B**
ವಿಜ್ಞಾನ / SCIENCE	20	**19**	80	28	**35**	100	35	**54**	**C+**
ಸಮಾಜ ವಿಜ್ಞಾನ / SOCIAL SCIENCE	20	**19**	80	28	**40**	100	35	**59**	**C+**
ಒಟ್ಟು ಅಂಕಗಳು / TOTAL MARKS	125	**118**	500	175	**266**	625	219	**384**	ಸಿಜಿಪಿ / CGPA : **B**

ಗಳಿಸಿದ ಒಟ್ಟು ಅಂಕಗಳು (ಅಕ್ಷರಗಳಲ್ಲಿ) / TOTAL MARKS OBTAINED (IN WORDS) : **THREE HUNDRED EIGHTY-FOUR ONLY**

Percentage / ಶೇಕಡಾವಾರು : **(61.44%)**

ಭಾಗ – ಬಿ / PART - B

ಕ್ರ. ಸಂ. / Sl. No.	ಸಹ ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು / CO-SCHOLASTIC SUBJECTS	ಶ್ರೇಣಿ / GRADE
1.	ದೈಹಿಕ ಮತ್ತು ಆರೋಗ್ಯ ಶಿಕ್ಷಣ / PHYSICAL & HEALTH EDUCATION	A
3.	ಕಾರ್ಯಾನುಭವ / WORK EXPERIENCE	A

ಕ್ರ. ಸಂ. / Sl. No.	ಸಹ ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು / CO-SCHOLASTIC SUBJECTS	ಶ್ರೇಣಿ / GRADE
2.	ಮನೋಭಾವ ಮತ್ತು ಮೌಲ್ಯಗಳು / ATTITUDE & VALUES	A
4.	ಕಲಾ ಶಿಕ್ಷಣ / ART EDUCATION	A

ABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSE

ಶಾಲಾ ಸಂಕೇತ / SCHOOL CODE : **AS0786**

ಶಾಲೆ ಹೆಸರು ಮತ್ತು ವಿಳಾಸ / SCHOOL NAME AND ADDRESS :
XFORD ENG HIGH SCHOOL

ALBHAHUDUR SHASTRINAGAR IST MAIN ROAD BENGALURU
0017

ಅಧ್ಯಕ್ಷರು
Chairman

ದಿನಾಂಕ / DATE : **08-05-2023**