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	
Middle Name	
Last Name	KEERTHAN

B. Name *(as per Aadhaar)*

KEERTHAN

2. Gender *(select one)* — [✓] Male [ ] Female [ ] Transgender

3. Date of Birth — 02 01 2007

4. Aadhaar Number — 361329703143

5. Residence Address

Flat/Door/Building	C/O ASHOK
Road/Street/Block/Sector	SALAGAME HOBLI
Post Office	UGNE
Area/Locality/Town/City	SANEGRAHALLI
District	HASSAN
State/Union Territory	KARNATAKA
Country/Region	INDIA
PIN / ZIP CODE	573216

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: 9741932554

(ii) Email ID: AJITHKEERTHAN426@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

Father's Middle Name	
Father's Last Name	ASHOK

14. Mother's First Name	
Mother's Middle Name	
Mother's Last Name	U S H 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: K A R
(ii) AO Type: W
(iii) Range Code: 3 2 1
(iv) AO No.: 9 2

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)* ☐ Tick 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

☐ Tick (i) Proof of Identity ☐ Tick (ii) Proof of Address ☐ Tick (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, KEERTHAN……., 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. HASSAN

Date.. 24/07/2026

Keerthan

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

Name: KEERTHAN

Designation: AUTHORIZED PERSON

ಆಧಾರ್

ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 0636/11059/09387

To
ಕೀರ್ತನ್
Keerthan
S/O: Ashok
Salagame Hobli
Sanenahalli
Hassan Karnataka - 573216
9741932554

Signature valid

ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

3613 2970 3143

VID : 9139 6890 9266 8108

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

ಭಾರತ ಸರ್ಕಾರ
Government of India

ಕೀರ್ತನ್
Keerthan
ಜನ್ಮ ದಿನಾಂಕ/DOB: 02/01/2007
ಪುರುಷ/ MALE

3613 2970 3143

VID : 9139 6890 9266 8108

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

Government of Karnataka

Department of Pre-University Education

TRANSFER CERTIFICATE

TC No.: **SJPUC/2025/0029**

1. Name of the College: ಕಾಲೇಜಿನ ಹೆಸರು	St. JOSEPH'S COMPOSITE PU COLLEGE Salagame Road,Hassan - 573 201 College code: LL0108 Udise No: 29230741718
2. Admission No/ ಪ್ರವೇಶ ಸಂಖ್ಯೆ	538/2024-25
3. SATS NO./ಸ್ಯಾಟ್ಸ್ ಸಂಖ್ಯೆ	114719322
4. Name of the Student/ವಿದ್ಯಾರ್ಥಿಯ ಹೆಸರು (as in the Admission Register)	KEERTHAN
5. Date of Birth (In Figures & In Words) ಹುಟ್ಟಿದ ದಿನಾಂಕ (ಅಂಕಿಗಳಲ್ಲಿ ಅಕ್ಷರಗಳಲ್ಲಿ)	02-01-2007 Second January Two Thousand Seven
6. Gender / ಲಿಂಗ	MALE
7. Father's Name / ತಂದೆಯ ಹೆಸರು	ASHOK
8. Mother's Name / ತಾಯಿಯ ಹೆಸರು	USHA
9. Nationality / ರಾಷ್ಟ್ರೀಯತೆ	INDIAN
10. Religion / ಧರ್ಮ	HINDU
11. Caste / ಜಾತಿ	LINGAYATH
12. Whether the student belongs to scheduled Caste of Scheduled Tribe: ವಿದ್ಯಾರ್ಥಿಯು ಪರಿಶಿಷ್ಟ ಜಾತಿ ಅಥವಾ ಪರಿಶಿಷ್ಟ ವರ್ಗಕ್ಕೆ ಸೇರಿದವನಾಗಿದ್ದಾನೆಯೇ? :YES/NO	13. Whether the student is qualified for the promotion for the next higher class ಮುಂದಿನ ತರಗತಿಗೆ ವಿದ್ಯಾರ್ಥಿಯು ಬಡ್ತಿಹೊಂದಿದ್ದಾನೆಯೇ? YES, QUALIFIED
14. Subjects studied in class I/II PUC Part I: Languages: ಅಧ್ಯಯನ ಮಾಡಿದ ವಿಷಯಗಳು 1 - KANNADA 2 - ENGLISH Part II: Optional Subjects: ಅಧ್ಯಯನ ಮಾಡಿದ ಐಚ್ಛಿಕ ವಿಷಯಗಳು 22 - ECONOMICS 27 - BUSI.STUDIES 30 - ACCOUNTANCY 41 - COMPUTER-SC	15. Medium Of Instruction ಮಾಧ್ಯಮ ENGLISH 16.a) Date of Admission to the College: 03-06-2024 ಕಾಲೇಜಿಗೆ ದಾಖಲಾದ ದಿನಾಂಕ b) Date of Leaving : 23-04-2025 ಕಾಲೇಜಿನಿಂದ ವರ್ಗಾವಣೆ ಪತ್ರ ಪಡೆದ ದಿನಾಂಕ
17. Class at the time of leaving: ಕಾಲೇಜು ಬಿಡುವಾಗ ವಿದ್ಯಾರ್ಥಿಯು ಓದುತ್ತಿದ್ದ ತರಗತಿ	II PUC
18. Whether all balance of fees paid or not? ಬಾಕಿಯಿರುವ ಎಲ್ಲಾ ಶುಲ್ಕಗಳನ್ನು ವಿದ್ಯಾರ್ಥಿಯಿಂದ ಪಡೆಯಲಾಗಿದೆಯೇ? YES, PAID	19. Date on which the Application for the Transfer Certificate was recieved : 15-04-2025 ವರ್ಗಾವಣೆ ಪ್ರಮಾಣ ಪತ್ರಕ್ಕಾಗಿ ಅರ್ಜಿಯನ್ನು ಸ್ವೀಕರಿಸಿದ ದಿನಾಂಕ
20. Conduct and Character of the student: ನೀತಿ ಮತ್ತು ಚಾರಿತ್ರ್ಯ	GOOD

PRINCIPAL

College Seal/ಕಾಲೇಜಿನ ಮೊಹರು

St. Joseph's Composite Pre-University College
HASSAN-573 201