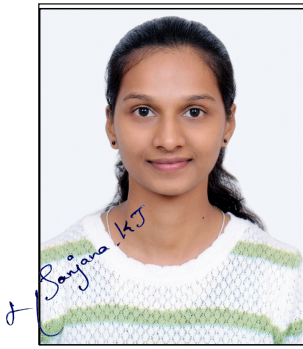


**FORM NO. 93****[See rule 158]****Application for Allotment of Permanent Account Number****[For an Individual being a Citizen of India]****Sr. No.****PART A - Personal Information****1. A. Name**

First Name

S A N J A N A

Middle Name

K A S T H U R I K O P P A L U

Last Name

J A V A N E G O W D A

B. Name (as per Aadhaar)

S A N J A N A K J

2. Gender (select one)☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

2 8 0 2 2 0 0 6

4. Aadhaar Number

7 5 3 2 0 8 2 5 8 0 0 2

5. Residence Address

Flat/Door/Building

C / O : J A V A N E G O W D A

Road/Street/Block/Sector

K A S T U R I K O P P A L U , J A V A G A L

Post Office

D E S H A N I

Area/Locality/Town/City

A R A S I K E R E T A L U K

District

H A S S A N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 3 1 2 2

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)☒ Tick

Resident

☐ Tick

Non Resident

☐ Tick

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

9 1

Mobile Number

8 2 1 7 0 6 4 0 2 3

(ii) Email ID

SANJANASANJU1546@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)**☐ Tick

Salary

☐ Tick

Income from Business/Profession

☐ Tick

Income from House Property

☐ Tick

Capital Gains

☒ Tick

Income from Other Sources

☐ Tick

No Income

PART C - Details of Parents**12. Whether mother/father is a single parent? (select one)**☐ Tick

Yes

☒ Tick

No

13. Father's First Name

Father's Middle Name

Father's Last Name

J A V A N E G O W D A

K A S T H U R I K O P P A L U

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

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

[illegible][illegible][illegible][illegible]

22. Address for Communication (select one) ☒ Residence Address ☐ Representative Assessee Address ☐ Office Address

23. Documents submitted as Proof of Identity, Proof of Address and Proof of Date of Birth of the Applicant

24. Documents submitted as Proof of Identity, Proof of Address of Representative Assessee

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಕಿವ್ಯಕ್ತಿ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 0648/16398/01005

To
ಪಂಜನ ಕೆ ಜೆ
Sanjana K J
C/O: Javanegowda

Kasthuri Koppalu
Javagal Hobali Arasikere Taluk
Deshani
Hassan Karnataka - 573122
8217064023

Signature valid



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

7532 0825 8002

VID : 9193 8249 4348 0063

ನನ್ನ ಆಧಾರ್. ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Issue Date: 28/11/2014



ಪಂಜನ ಕೆ ಜೆ
Sanjana K J
ಜನನ ದಿನಾಂಕ/DOB: 28/02/2006
ಪ್ರಕಾರ/FEMALE

7532 0825 8002

VID : 9193 8249 4348 0063



ಕರ್ನಾಟಕ ಸರ್ಕಾರ
GOVERNMENT OF KARNATAKA
ಕರ್ನಾಟಕ ಶಾಲಾ ಪರೀಕ್ಷೆ ಮತ್ತು ಮೌಲ್ಯನಿರ್ಣಯ ಮಂಡಳಿ, ಬೆಂಗಳೂರು
Karnataka School Examination and Assessment Board, Bengaluru
ಅಂಕಪಟ್ಟಿ ಹಾಗೂ ಪರೀಕ್ಷಾ ಸಮಸ್ಯೆ

ನೋಂದಣಿ ಸಂಖ್ಯೆ/Register No.: 20249546253

ಮಾಧ್ಯಮ / Medium: **KANNADA**

ವರ್ಷ / Year : 2024

Category of WP / Candidate Type : **REGULAR**

ಅಭ್ಯರ್ಥಿಯ ಹೆಸರು / Candidate's Name : SANJANA K J

ತಂದೆಯ ಹೆಸರು / Father's Name : JAVANE GOWDA K

ತಾಯಿಯ ಹೆಸರು / Mother's Name : **ASHA G S**

ડોળ / Gender : **FEMALE**

KSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSE

Govt. Pre-University College
ANSIKERE-573103, HASSAN C.

Maryanne

ಅಧ್ಯಕ್ಷರು
Chairperson

YEAR OF RESULT : 2024 College code :- LL0010