

Sushma D.N



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 U S H M A

Middle Name

D O D D A H A R A N A H A L L I

Last Name

N I N G A R A J E G O W D A

B. Name (as per Aadhaar)

S U S H M A D N

2. Gender (select one)

Tick

Male

Tick

Female

Tick

Transgender

3. Date of Birth

1

9

0

2

2

0

0

6

4. Aadhaar Number

2

7

5

4

0

8

9

3

4

7

8

6

5. Residence Address

Flat/Door/Building

C / O N I N G A R A J E G O W D A

Road/Street/Block/Sector

K R P E T T A L U K , S A R I T H E B A

Post Office

Area/Locality/Town/City

D O D D A G A N A H A L L I

District

M A N D Y A

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 1 4 3 6

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

9

7

0

0

5

3

9

7

0

(ii) Email ID

cyberspot2018@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

N I N G A R A J E G O W D A

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
(iii) Range Code	3	2	1

(ii) AO Type	W	
(iv) AO No.	9	3

[illegible][illegible][illegible]

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				

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

☒ (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
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SUSHMA D N
a. I, _____, in the capacity of _____ (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. **MANDYA**
Date. **19/09/2026**

Sughma D.N

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

Name: SUSHMA D N

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

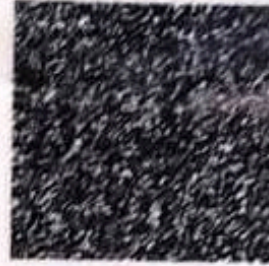
ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/Enrolment No.: 0648/17910/02855

To
ಸುಷ್ಮಾ ಡಿ ಎನ್
Sushma D N
D/O Ningarajegowda
k r pet taluku
santhebachahalli hobali
Doddaharanahalli
Mandya Karnataka - 571436
8970053970

Signature valid





ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

2754 0893 4786

VID : 9185 2900 4058 0916

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಸುಷ್ಮಾ ಡಿ ಎನ್
Sushma D N
ಹುಟ್ಟು ದಿನಾಂಕ/DOB: 19/02/2006
♀ FEMALE

Issuance Date: 25/07/2015

2754 0893 4786

VID : 9185 2900 4058 0916

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



22212704

GOVERNMENT OF KARNATAKA

ಕರ್ನಾಟಕ ಪ್ರೌಢ ಶಿಕ್ಷಣ ಪರಿಷತ್ ಮಂಡಳಿ

Karnataka Secondary Education Examination Board

get my marks online at / Marks Statement cum Certificate

Downloaded from <http://ajphaphysiol.physiology.org/> by guest on September 11, 2012

This is to certify that the below mentioned candidate has passed S.S.I.C. Examination.

ZFF16426



025877691

Заказ №2 / Register No. : 20220049449

Semester / Month / Year : **APRIL-2022**

ಹೆಸರು / Medium of Instruction : **KANNADA**

ඉගැන්වීම / Candidate Type : CCE REGULAR FRESH

Student / Name : **SUSHMA D N**

ತಾಯಿಯ ಹೆಸರು / Father's Name : **NINGARAJEGOWDA**

மாமா / Mother's Name : **RATHNA**

19-02-2006 NINETEENTH - FEBRUARY - TWO THOUSAND SIX

Cost / Gender	GIRL
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QSR - 2 / PART - A

	ಬಾಹ್ಯ ಪರೀಕ್ಷೆ EXTERNAL EXAMINATION			ಆಂತರಿಕ ಪರೀಕ್ಷೆ INTERNAL ASSESSMENT		ಒಟ್ಟು ಅಂಕಗಳು TOTAL MARKS			
ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು SCHOLASTIC SUBJECTS	ಗರಿಷ್ಠ ಅಂಕಗಳು MAX. MARKS	ಕನಿಷ್ಠ ಅಂಕಗಳು MIN. MARKS	ಗಳಿಸಿದ ಅಂಕಗಳು MARKS OBTAINED	ಗರಿಷ್ಠ ಅಂಕಗಳು MAX. MARKS	ಗಳಿಸಿದ ಅಂಕಗಳು MARKS OBTAINED	ಗರಿಷ್ಠ ಅಂಕಗಳು MAX. MARKS	ಕನಿಷ್ಠ ಅಂಕಗಳು MIN. MARKS	ಒಟ್ಟು ಅಂಕಗಳು TOTAL MARKS	ದರ್ಜೆ GRADE
ಪ್ರಥಮ ಭಾಷೆ / FIRST LANGUAGE : KANNADA	100	35	97	25	25	125	44	122	A+
ದ್ವಿತೀಯ ಭಾಷೆ / SECOND LANGUAGE : ENGLISH	80	28	62	20	19	100	35	81	A
ತೃತೀಯ ಭಾಷೆ / THIRD LANGUAGE : HINDI	80	28	62	20	20	100	35	82	A
ಗಣಿತ / MATHEMATICS	80	28	76	20	20	100	35	96	A+
ವಿಜ್ಞಾನ / SCIENCE	80	28	59	20	20	100	35	79	B+
ಸಾಮಾಜಿಕ ವಿಜ್ಞಾನ / SOCIAL SCIENCE	80	28	72	20	20	100	35	92	A+
ಒಟ್ಟು ಅಂಕಗಳು / TOTAL MARKS :	500	175	428	125	124	625	219	552	ಸರಾಸರಿ / CGA : A
ಗಳಿಸಿದ ಒಟ್ಟು ಅಂಕಗಳು (ಅಕ್ಷರಗಳಲ್ಲಿ) / TOTAL MARKS OBTAINED (IN WORDS) FIVE HUNDRED FIFTY-TWO ONLY								Percentage / ಶೇಕಡೆ : (88.32%)	

UNIT - 2 / PART - B

ಕ್ರ. ಸಂ. / Sl. No.	ಸಹ ಶಿಕ್ಷಣದ ವಿಷಯಗಳು / CO-SCHOLASTIC SUBJECTS	ಶ್ರೇಣಿ / GRADE	ಕ್ರ. ಸಂ. / Sl. No.	ಸಹ ಶಿಕ್ಷಣದ ವಿಷಯಗಳು / CO-SCHOLASTIC SUBJECTS	ಶ್ರೇಣಿ / GRADE
1.	ಶಿಕ್ಷಣ ಮತ್ತು ಆರೋಗ್ಯ ವಿಜ್ಞಾನ / PHYSICAL & HEALTH EDUCATION	A	2.	ಮೌಲ್ಯಗಳ ಮತ್ತು ಮೌಲ್ಯಗಳು / ATTITUDE & VALUES	A
3.	ಕಾರ್ಯಾಚರಣೆ / WORK EXPERIENCE	A	4.	ಕಲಾ ವಿಜ್ಞಾನ / ART EDUCATION	A

KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB

new roles / SCHOOL CODE FF0234

NAME OF THE CHILD / SCHOOL NAME AND ADDRESS

JNANA DEGULA HIGH SCHOOL

HARIYALADAMMAGUDI,MARENAHALLY,KUNDUR
[PO],KRISHNARAJAPET TALUK,MANDYA DISTRICT-571423

DATE: 19-05-2022

Inyuk

Wiederholung

ಕರ್ನಾಟಕ ಪ್ರೌಢ ಶಿಕ್ಷಣ ಪರಿಷತ್, ಮಂಡ್ಯ, ಬೆಂಗಳೂರು
SECRETARY

KARNATAKA SECONDARY EDUCATION EXAMINATIONS BOARD,
BENGALURU

2221 2704