

**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

K E E R T H A N

B. Name (as per Aadhaar)

K E E R T H A N

2. Gender (select one)

Male



Female



Transgender

3. Date of Birth

0

2

0

1

2

0

0

7

4. Aadhaar Number

3

6

1

3

2

9

7

0

3

1

4

3

5. Residence Address

Flat/Door/Building

C

/

O

A

S

H

O

K

Road/Street/Block/Sector

S

A

L

A

G

A

M

E

H

O

B

L

I

Post Office

U

G

N

E

Area/Locality/Town/City

S

A

N

E

G

R

A

H

A

L

L

I

District

H

A

S

S

A

N

State/Union Territory

KARNATAKA

Country/Region

I N D I A

PIN / ZIP CODE

5

7

3

2

1

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)

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

9

1

Mobile Number

9

7

4

1

9

3

2

5

5

4

(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

A

S

H

O

K

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

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

(i) Mobile Number	Country Code		Mobile Number	
(ii) Email ID				
(iii) Landline No. with STD Code (<i>if any</i>)	STD Code		Landline Number	

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

☒ (i) Proof of Identity ☒ (ii) Proof of Address ☒ (iii) Proof of Date of Birth

☐ Tick (i) Proof of Identity ☐ Tick (ii) Proof of Address

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**



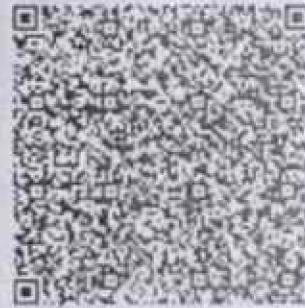
ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

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

To
ಕೀರ್ತನ್
Keerthan
S/O: Ashok
Salagame Hobli
Sanehalli
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
ಪ್ರಕಾರ/ GENDER: 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: 110108 Udise No: 29230741718
2. Admission No/ ಪ್ರವೇಶ ಸಂಖ್ಯೆ	538/2024-25
3. SATS NO./ವಿದ್ಯಾರ್ಥಿ 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 (ಅಂಕಗಳಲ್ಲಿ 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 ಹೆಚ್ಚಿನ ವಿದ್ಯಾರ್ಥಿಯು ಏರ್ಪಡಿಸಿದವನಾಗಿದ್ದಾನೆಯೇ? 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 ವರ್ತಮಾನ 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 ಪ್ರವೇಶಿಸಿದ 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 ಕುಲಸೌಕರ್ಯವನ್ನು 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: ಶಿಕ್ಷಣ ಮತ್ತು ಚಾರಿತ್ರ್ಯ	GOOD

College Seal/ಕಾಲೇಜಿನ ಮೊಹರು

PRINCIPAL

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