



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

A M I T H

Middle Name

Y A D A V S O N D E K E R E

Last Name

Y O G I S H

B. Name (as per Aadhaar)

A M I T H Y A D A V S Y

2. Gender (select one)



Male



Female



Transgender

3. Date of Birth

2

9

0

9

2

0

0

7

4. Aadhaar Number

8

1

0

3

9

4

5

5

4

1

7

9

5. Residence Address

Flat/Door/Building

0

1

Road/Street/Block/Sector

S O D E K E R E

Post Office

S O N D E K E R E

Area/Locality/Town/City

H I R I Y U R

District

C H I T R A D U R G A

State/Union Territory

KARNATAKA

Country/Region

I N D I A

PIN / ZIP CODE

5

7

7

5

3

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)



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

7

3

3

8

1

6

2

6

7

2

(ii) Email ID

ganesh123bvr@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

Y O G I S H

14. Mother's First Name	
Mother's Middle Name	
Mother's Last Name	M A N J U L A

15. Name of parent to be printed on Permanent Account Number card (select one) ☒ Father ☐ 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	1 2 8	(iv) AO No.	9 3

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 ☐ Representative Assessee Address ☐ 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

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

Verification & Declaration

AMITH YADAV S Y

a. I, AMITH YADAV S Y, 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. CHITRADURGA

Date. 27/08/2026

ಅಮಿತ ಯಾದವ್ ಸಿ.ಯು.

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

Name: AMITH YADAV S Y

Designation: AUTHORIZED PERSON



भारत सरकार
भारत सरकार



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/Enrolment No.: 4064/35009/00279

To
ಅಮಿತ್ ಯಾದವ್ ಎಸ್ ವೈ
Amith Yadav S Y
S/O: Yogish,
VTC: Sondekere,
PO: Sondekere,
Sub District: Hiriyur,
District: Chitradurga,
State: Karnataka,
PIN Code: 577532,
Mobile: 7338162672

Signature valid

Digitally signed
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA
Date: 2024.04.18 12:37:38
GMT+05:30



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

8103 9455 4179

VID : 9153 1301 6874 3414

ನನ್ನ ಆಧಾರ್. ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. Issued: 17/01/2016



ಅಮಿತ್ ಯಾದವ್ ಎಸ್ ವೈ
Amith Yadav S Y
ಜನನ ದಿನಾಂಕ/DOB: 29/09/2007
ಪುರುಷ/ MALE

ಆಧಾರ್ ಗುರುತಿನ ಪ್ರಮಾಣವಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪ್ರಮಾಣವಲ್ಲ. ಇದನ್ನು ಆನ್‌ಲೈನ್ ದೃಢೀಕರಣ ಅಥವಾ QR ಕೋಡ್ / ಆಫ್‌ಲೈನ್ XML ಸ್ಕ್ಯಾನಿಂಗ್‌ನೊಂದಿಗೆ ಮಾತ್ರ ಬಳಸಬೇಕು.

Aadhaar is proof of identity, not of citizenship or date of birth. It should be used only with verification (online authentication or scanning of QR code / offline XML)

8103 9455 4179

ನನ್ನ ಆಧಾರ್. ನನ್ನ ಗುರುತು



ಕರ್ನಾಟಕ ಸರ್ಕಾರ
GOVERNMENT OF KARNATAKA

ಕರ್ನಾಟಕ ಶಾಲಾ ಪರೀಕ್ಷೆ ಮತ್ತು ಮೌಲ್ಯನಿರ್ಣಯ ಮಂಡಳಿ, ಬೆಂಗಳೂರು
Karnataka School Examination and Assessment Board, Bengaluru
ಅಂಕಪಟ್ಟಿ ಹಾಗೂ ಪ್ರಮಾಣ ಪತ್ರ / Marks Statement cum Certificate

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



006204616

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Register No. : 20230180277

ವರ್ಷ / Year : **MARCH/APRIL - 2023**

ಶಿಕ್ಷಣ ಮಾಧ್ಯಮ / Medium of Instruction : **KANNADA**

ಅಭ್ಯರ್ಥಿ ಬಗ್ಗೆ / Candidate Type : CCE REGULAR FRESH

ಅಭ್ಯರ್ಥಿಯ ಹೆಸರು / Candidate's Name : **AMITH YADAV S Y**

ತಂದೆಯ ಹೆಸರು / Father's Name : **YOGISH**

ತಾಯಿಯ ಹೆಸರು / Mother's Name : **MANJULA**

ಜನ್ಮ ದಿನಾಂಕ/ 29-09-2007 TWENTY-NINTH - SEPTEMBER - TWO THOUSAND SEVEN
Date of Birth : ಭಾಗ - ೨ / PART - A

♂/ BOY
Gender :

પાગ-૯ / PART - A

ಭಾಗ - ಎ / PART - A										
ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು SCHOLASTIC SUBJECTS	ಆಂತರಿಕ ಮೌಲ್ಯಮಾಪನ INTERNAL ASSESSMENT		ಬಾಹ್ಯ ಪರೀಕ್ಷೆ EXTERNAL EXAMINATION			ಒಟ್ಟು ಅಂಕಗಳು TOTAL MARKS			ಶೇರಿ GRADE	
	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		
ಪ್ರಥಮ ಭಾಷೆ / FIRST LANGUAGE KANNADA	25	25	100	35	78	125	44	103	A	
ದ್ವಿತೀಯ ಭಾಷೆ / SECOND LANGUAGE ENGLISH	20	20	80	28	69	100	35	89	A	
ತೃತೀಯ ಭಾಷೆ / THIRD LANGUAGE HINDI	20	20	80	28	40	100	35	60	B	
ಗಣಿತ / MATHEMATICS	20	20	80	28	43	100	35	63	B	
ವಿಜ್ಞಾನ / SCIENCE	20	20	80	28	43	100	35	63	B	
ಸಮಾಜ ವಿಜ್ಞಾನ / SOCIAL SCIENCE	20	20	80	28	61	100	35	81	A	
ಒಟ್ಟು ಅಂಕಗಳು / TOTAL MARKS	125	125	500	175	334	625	219	459	ಸರಾಸರಿ / CGA : B+	
ಗಳಿಸಿದ ಒಟ್ಟು ಅಂಕಗಳು (ಅಕ್ಷರಗಳಲ್ಲಿ) / TOTAL MARKS OBTAINED (IN WORDS):						FOUR HUNDRED FIFTY-NINE ONLY				
						Percentage / ಶೇಕಡಾವಾರು: (73.44%)				

ಭಾಗ - ಬಿ / PART - B

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

WORK EXPERIENCE

NO. NAME SEX BIRTH DATE BIRTH PLACE EDUCATION QUALIFICATION WORK EXPERIENCE

ಶಾಲಾ ಸಂಕೇತ / SCHOOL CODE: LL0203

ಶಾಲಾ ಹೆಸರು ಮತ್ತು ವಿಳಾಸ / SCHOOL NAME AND ADDRESS:

SRI KALABHYRAVESHWARA HIGH SCHOOL

SYANEGERE ARASIKERE TALUK HASSAN DISTRICT 573112

ದಿನಾಂಕ/ DATE: 08-05-2023

Chairman

23338144