



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

K I S H O R

Middle Name

A D A G U R

Last Name

S H A N K A R A I A H

B. Name (as per Aadhaar)

K I S H O R

A S

2. Gender (select one)



Male



Female



Transgender

3. Date of Birth

2 5

0 5

2 0 0 6

4. Aadhaar Number

5 3 9 2 9 2 1 5 4 9 1 5

5. Residence Address

Flat/Door/Building

C / O S H A N K A R A I A H

Road/Street/Block/Sector

A D A G O O R U A D A G U R

Post Office

A D A G O O R U

Area/Locality/Town/City

B E L U R

District

H A S S A N

State/Union Territory

KARNATAKA

Country/Region

I N D I A

PIN / ZIP CODE

5 7 3 1 2 1

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 6 1 1 6 3 6 5 5 4

(ii) Email ID

YUKTHAINSURANCE@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

S H A N K A R A I A H

14. Mother's First Name	
Mother's Middle Name	
Mother's Last Name	P R A T H I B H 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	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) ☒ 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

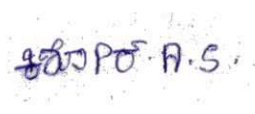
KISHOR A S

a. I, KISHOR A S, 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. 27/08/2026



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

Name: KISHOR A S

Designation: AUTHORIZED PERSON



ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India
Government of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No.: 2744/12909/00229

To
ಕಿಶೋರ್ ಎ ಎಸ್
Kishor A S
S/O: Shankarayya
Adagooru
Adagur
Belur Hassan
Karnataka 573121
9611636554

116816990



ME168169909FH



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

5392 9215 4915

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ

Government of India



ಕಿಶೋರ್ ಎ ಎಸ್
Kishor A S
ಜನ್ಮ ದಿನಾಂಕ / DOB : 25/05/2006
ಪುರುಷ / Male



5392 9215 4915

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಕರ್ನಾಟಕ



GOVERNMENT OF KARNATAKA

Karnataka Secondary Education Examination Board

ಅಂಕ ಪಟ್ಟಿಹಾಗೂ 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.

001839799

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Register No. : 20210233860

ತಿಂಗಳು - ವರ್ಷ / Month - Year : JULY-2021

ಶಿಕ್ಷಣ ಮಾಧ್ಯಮ / Medium of Instruction : KANNADA

અધ્યર્થી બગે / Candidate Type : CCE REGULAR FRESH

ಹೆಸರು / Name : KISHOR A S

ತಂದೆಯ ಹೆಸರು / Father's Name : SHANKARAI AH

ತಾಯಿಯ ಹೆಸರು / Mother's Name : PRATHIBHA

ಜನ್ಮ ದಿನಾಂಕ/ 25-05-2006 TWENTY-FIFTH - MAY - TWO THOUSAND SIX
Date of Birth :

બિંગ / BOY
Gender :

ಭಾಗ - ಎ / PART - A

	ಬಾಹ್ಯ ಪರೀಕ್ಷೆ EXTERNAL EXAMINATION			ಆಂತರಿಕ ಮಾಲ್ಯಮಾಪನ 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	ಶ್ರೇಣಿ GRADE
ಪ್ರಥಮ ಭಾಷೆ / FIRST LANGUAGE : KANNADA	100	35	83	25	24	125	44	107	A
ದ್ವಿತೀಯ ಭಾಷೆ / SECOND LANGUAGE : ENGLISH	80	28	62	20	20	100	35	82	A
ತೃತೀಯ ಭಾಷೆ / THIRD LANGUAGE : HINDI	80	28	66	20	20	100	35	86	A
ಗಣಿತ / MATHEMATICS	80	28	38	20	19	100	35	57	C
ವಿಜ್ಞಾನ / SCIENCE	80	28	28	20	20	100	35	48	C
ಸಮಾಜ ವಿಜ್ಞಾನ / SOCIAL SCIENCE	80	28	54	20	20	100	35	74	B
ಒಟ್ಟು ಅಂಕಗಳು / TOTAL MARKS :	500	175	331	125	123	625	219	454	ಸರಾಸರಿ / CGA : B

ಗಳಿಸಿದ ಒಟ್ಟು ಅಂಕಗಳು (ಅಕ್ಷರಗಳಲ್ಲಿ) /

TOTAL MARKS OBTAINED (IN WORDS): **FOUR HUNDRED FIFTY FOUR**

(72.64%)

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

ಕ್ರ. ಸಂ./ Sl. No.	ಸಹ ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು / CO-SCHOLASTIC SUBJECTS	ಶ್ರೇಣಿ / GRADE
2.	ಮನೋಭಾವ ಮತ್ತು ಮೌಲ್ಯಗಳು / ATTITUDE & VALUES	A
4.	ಕಲಾ ಶಿಕ್ಷಣ / ART EDUCATION	A

[illegible]

ಶಾಲಾ ಸಂಕೇತ, ಹೆಸರು ಮತ್ತು ವಿಳಾಸ /
SCHOOL CODE, NAME AND ADDRESS :

LL0079

GOVERNMENT HIGH SCHOOL

ADAGUR BELUR TALUK, HASSAN DISTRICT- 573121

Ex. 1.

ಕಾರ್ಯದರ್ಶಿ

ಕರ್ನಾಟಕ ಪೌಢ ಶಿಕ್ಷಣ ಪರಿಷತ್, ಮಂಡಳಿ, ಬೆಂಗಳೂರು

SECRETARY

KARNATAKA SECONDARY EDUCATION EXAMINATION BOARD,
BENGALURU

ದಿನಾಂಕ/ DATE : 09.08.2021