



Divya S.P.



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

D I V Y A

Middle Name

S N K E N A H A L L I

Last Name

P R A V E E N A

B. Name (as per Aadhaar)

D I V Y A S P

2. Gender (select one)

☐ Male ☒ Female ☐ Transgender

3. Date of Birth

2 5 0 1 2 0 0 4

4. Aadhaar Number

2 7 4 3 3 6 6 1 5 3 0 3

5. Residence Address

Flat/Door/Building

1 2 8

Road/Street/Block/Sector

A R A S I K E R E R O A D N E A R G O V T

Post Office

D O D D A P U R A

Area/Locality/Town/City

D O D D A P U R A A L U R

District

H A S S A N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 3 1 1 8

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

6 3 6 6 8 8 5 0 7 8

(ii) Email ID

MAMATHAKIRAN2017@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

P R A V E E N A

14. Mother's First Name	
Mother's Middle Name	
Mother's Last Name	S A V I T 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

DIVYA S P

a. I, 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. 01/10/2026

Divya S.P

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

Name: DIVYA S P

Designation: AUTHORIZED PERSON



ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India
Government of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No 2017/60337/05285

To,
ಡಿವೈ ಎಸ್ ಪಿ
Divya S P
D/O: Praveena
128
Arasikere Road
Near Govt School Sankenahalli Village
Doddapura
Doddapura Alur Hassan
Karnataka 573118
9535346857

Ref: 1006 / 3 / C / 380634 / 380714 / P



SE610675600FT



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

2743 3661 5303

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಡಿವೈ ಎಸ್ ಪಿ
Divya S P
ಜನ್ಮ ದಿನಾಂಕ / DOB : 25/01/2004
ಸ್ತ್ರೀ / Female



2743 3661 5303

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



GOVERNMENT OF KARNATAKA

[illegible]

active - state / Month - Year : APRIL-2019

Date / Month - Year : APRIL 2017
Candidate Type : CCE REGULAR FRESH

DoR / GIRL
Gender :

25-01-2004 TWENTY-FIFTH - JANUARY - TWO THOUSAND FOUR

ମୋଟ ପ୍ରାପ୍ତ ଖଣ୍ଡ (ଅକ୍ଷରରେ) / **THREE HUNDRED THIRTY THREE ONLY** (53.28 %)

TOTAL MARKS OBTAINED (IN WORDS):

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.	ಕಾರ್ಯಾಸುಭವ / WORK EXPERIENCE	A

ಕಾರ್ಯದರ್ಶಿ
ಕರ್ನಾಟಕ ಪ್ರೌಢ ಶಿಕ್ಷಣ ಪರೀಕ್ಷಾ ಮಂಡಳಿ, ಬೆಂಗಳೂರು
SECRETARY
KARNATAKA SECONDARY EDUCATION EXAMINATION BOARD,
BENGALURU