

INTERNATIONAL KANGAROO LINGUISTIC CONTEST

in collaboration with KGL Contest English Olympiad

CORRECTION/REPLACEMENT FORM

NSTITUTION'S D	DETAILS	
IKLC INSTITU	TION CODE:	
INSTITUTION'S	S NAME (If correction required):	
INSTITUTION'S	S POSTAL ADDRESS (If correction required):	
TEHSIL		DISTRICT
PHONE (S)		E Mail
OFFICIAL BAI	NK TITLE OF THE INSTITUTION'S BANK ACCOUNT FOR	HONORARIUM
		(If correction required)
PRINCIPAL'S	CONTACT DETAILS	
	(If correction required)	
NAME		
CELL NO.		E MAIL
COORDINATO	OR'S CONTACT DETAILS (If correction required)	
NAME		
CELL NO.		EMAIL



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STUDENT(S) CORRECTION FORM (If required)

S.NO.	ROLL NO.	STUDENT'S NAME	FATHER'S NAME	CLASS (If change)

REMARKS: _____

SIGNATURES & STAMP
PRINCIPAL /HEAD OF THE INSTITUTION



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STUDENT(S) REPLACEMENT FORM (If required)

S.NO.	ROLL NO.	REPLACEMENT FROM		REPLACEMENT TO			
		STUDENT'S NAME	FATHER'S NAME	CLASS	STUDENT'S NAME	FATHER'S NAME	CLASS
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REMARKS: _____

SIGNATURES & STAMP
PRINCIPAL /HEAD OF THE INSTITUTION