

## INTERNATIONAL KANGAROO LINGUISTIC CONTEST

in collaboration with KGL Contest English Olympiad

#### **REGISTRATION FORM**

#### **INSTRUCTIONS & IMPORTANT DEADLINES:**

- I. Please fill all the columns with Black/Blue permanent ink in Capital letters only.
- II. A separate registration page (Page 04 of registration form) may be used for each participating class. (Don't register the names of students from multiple classes on one page).
- III. Minimum Participation of 10 students from a participating class is MUST. There is no maximum limit.
- IV. The last date of submitting registration form is October 2, 2024 with normal fee, after this date the institutions can register by paying late fee of Rs. 5,000 (per institution) till October 4, 2024 and by paying double late fee of Rs. 10,000 (per institution) till October 7, 2024. Thereafter no registration will be accepted.
- V. There are following rounds:

Contest Date (In-class paper based examinations)
KGL Stage II (In-class online examinations)
Global Event (Greece)

Nov. 14, 2024 Mar. 17-20, 2025 Oct. 3-5, 2025

VI. The participation fee is **Rs. 1100/-** per participant, which can be paid through Bank Draft/Pay Order, drawn in favour of **CREATIVE LEARNING SERVICES**.

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The fee can also be directly transferred to our A/C: CREATIVE LEARNING SERVICES, NTN: B408028, A/C No: 18587901695803 IBAN: PK82 HABB 0018 5879 0169 5803, Bank Name: HABIB BANK LIMITED, Branch: H-BLOCK, DHA, PHASE - I, LAHORE.

- VII. The registration fee once paid is non-refundable and non-transferable.
- VIII. The registration forms complete in all respects should be sent to the following Postal Address:

#### CREATIVE LEARNING SERVICES

International Kangaroo Linguistic Contest 2024

1st Floor, G-2, Commercial Area, Phase – I

Defence Housing Authority, Lahore Cantt. 54792

Phone: +92-42-35744666, +92-42-35692728

IX. All particulars in the registration form must be filled as illustrated below. Variation from the format can result in the rejection of registration.

S.NO.	STUDENT'S NAME	FATHER'S NAME
1	HASSAN BIN WALEED	WALEED AHMED MASHWANI

For any further assistance, you can contact Creative Learning Services:

Email: <u>info.iklc@kangaroo.org.pk</u>

Office: +92-42-35744666, +92-42-35692728

Cell: +92-321-8882252, +92-324-4219999, +92-321-9311119

1 | IKLC - CLS



### INTERNATIONAL KANGAROO LINGUISTIC CONTEST

in collaboration with KGL Contest English Olympiad

INSTITUTION'S NAME:  INSTITUTION'S POSTAL ADDRESS:  Tehsil District Phone (s) Fax Email  OFFICIAL TITLE OF THE INSTITUTION'S BANK ACCOUNT FOR HONORARIUM  2. PRINCIPAL'S CONTACT DETAILS (FIRST CONTACT) First Name Middle Name Last Name Cell No. Office Phone No. Email  3. COORDINATOR'S CONTACT DETAILS (SECOND CONTACT) Institution must nominate an official to coordinate and to correspond in the absence of Principal. First Name Middle Name Last Name Cell No. Office Phone No. Email  ACCOUNT TITLE FOR COORDINATOR'S CASH AWARD (if no. of students 101 or above)  4. CONTEST OPTIONS (Please tick any one): Paper Based Online	1. INSTITUTION'S DETAILS  IKSC INSTITUTION CODE: (Last Year's 5 digits Unique Institution Code for IKLC)						
Tehsit  District  Phone (s)  Fax  Emait  OFFICIAL TITLE OF THE INSTITUTION'S BANK ACCOUNT FOR HONORARIUM  2. PRINCIPAL'S CONTACT DETAILS (FIRST CONTACT)  First Name  Middle Name  Last Name  Cell No.  Office Phone No.  Emait  3. COORDINATOR'S CONTACT DETAILS (SECOND CONTACT)  Institution must nominate an official to coordinate and to correspond in the absence of Principal.  First Name  Middle Name  Last Name  Cell No.  Office Phone No.  Emait  ACCOUNT TITLE FOR COORDINATOR'S CASH AWARD (if no. of students 101 or above)  4. CONTEST OPTIONS (Please tick any one):	INSTITUTION'S NAME:						
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Middle Name  Last Name  Cell No.  Office Phone No.  Email  3. COORDINATOR'S CONTACT DETAILS (SECOND CONTACT)     Institution must nominate an official to coordinate and to correspond in the absence of Principal.  First Name  Middle Name  Last Name  Cell No.  Office Phone No.  Email  ACCOUNT TITLE FOR COORDINATOR'S CASH AWARD (if no. of students 101 or above)  4. CONTEST OPTIONS (Please tick any one):	2. PRINCIP	PAL'S CO	NTACT DETAILS (FIRST CONTACT)				
Last Name Cell No. Office Phone No. Email  3. COORDINATOR'S CONTACT DETAILS (SECOND CONTACT) Institution must nominate an official to coordinate and to correspond in the absence of Principal. First Name Middle Name Last Name Cell No. Office Phone No. Email  ACCOUNT TITLE FOR COORDINATOR'S CASH AWARD (if no. of students 101 or above)  4. CONTEST OPTIONS (Please tick any one):	First Name	е					
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Cell No.  Office Phone No.  Email  ACCOUNT TITLE FOR COORDINATOR'S CASH AWARD (if no. of students 101 or above)  4. CONTEST OPTIONS (Please tick any one):		ne					
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	AC	CCOUNT T	ITLE FOR COORDINATOR'S CASH AWARD (if no. of students 101 or above)				
Paper Based Online	4. CONTEST OPTIONS (Please tick any one):						



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5. DETAILS OF REGISTERED STUDENTS (Class-wise summary of students to be registered):

LEVEL	CLASS		NO. OF STUDENTS (in figures)	
PRE	01	ONE		
ECOLIER	02	TWO		
ECOLIER	03	THREE		
ECULIER	04	FOUR		
BENJAMIN	05	FIVE		
BENJAMIN	06	SIX		
CADET	07	SEVEN		
CADET	08	EIGHT/O LEVEL-I		
JUNIOR	09	NINE/O LEVEL-I & II		
JUNIUK	10	TEN/O LEVEL-II & III		
STUDENT	11	ELEVEN/O LEVEL-III & A LEVEL-I		
STODENT	12	TWELVE/A LEVEL-I & II		
	TOTAL NO. OF STUDENTS			

#### 6. UNDERTAKING

I hereby certify that:

- 1. I undertake the full responsibility to act as a Chief Examiner for the paper based and online rounds of IKLC 2024 and to conduct the exam following the IKLC code of conduct and by making all necessary examination arrangements at our institution maintaining the international standards and ensuring the secrecy & transparency of the written test.
- 2.1 also assure that my institution will fully abide by IKLC code of conduct, all rules, regulations and instructions of the IKLC being enforced time to time.

3.1 also certify that I have enclose	ed Deposit Slip/Bank Draft/Pay Order in original bearing No
dated:	amounting to Rs. (in figures) as
registration fee for total number of _	students as mentioned in above summary @ Rs. 1100 pe
student in favour of CREATIVE LEAR	NING SERVICES

### Deposit Slip/Bank Draft/Pay Order in original PLEASE ATTACH HERE

A/C Title: CREATIVE LEARNING SERVICES NTN: B408028

A/C No: **18587901695803** 

IBAN: **PK82 HABB 0018 5879 0169 5803** 

Bank Name: HABIB BANK LIMITED, Branch: H-BLOCK, DHA, PHASE - I, LAHORE.

SIGNATURES & STAMP
PRINCIPAL /HEAD OF THE INSTITUTION



# INTERNATIONAL KANGAROO LINGUISTIC CONTEST

in collaboration with KGL Contest English Olympiad

## STUDENTS REGISTRATION SHEET FOR THE CLASS\_\_\_\_

A separate registration page may be used for each participating class. Don't register the names of students from multiple classes on one page. Please fill the particulars of students very carefully according to your institution's office record using capital letters. These particulars will appear on the certificates/mark sheets. Any change requested therein after the issuance of result/certificates will be subject to the payment of a fee of Rs. 1,500 per document.

S.NO.	STUDENT'S NAME	FATHER'S NAME
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