Form No. WBCROS/HS/01



THE WEST BENGAL COUNCIL OF RABINDRA OPEN SCHOOLING

Bikash Bhavan (2nd Floor, East Block), Bidhannagar, Kolkata- 700091

CORRECTION (S) FORM

	FOR UCH	CHA MADHYAMIK	(HIGHER SI	ECONDARY) LEVEL		
APPLIC	CATION FORM FOR CORRECTION	OF MY NAME) / MIDDLE	NAME O/SURNAM	E ()/FATHER'S NAME () /	
FATHER'S MIDDLE NAME()// FATHER'S SURNAME() / MOTHER'S NAME() / MOTHER'S MIDDLE NAME()/ MOTHER'S						
SURNA	ME ()/GUARDIAN'S NAME ()	/ GUARDIAN'S MIDI	DLE NAME ()/ GUARDIAN'S SUF	NAME ()/ DATE OF BIRTH	
○/GEN	NDER 🔘				7	
[Please	e (v) the necessary correction]					
	(Any correction mu	<u>ıst be done within o</u>	ne year fron	n the date of registra	tion)	
	Instructions in the separate	sheet enclosed mus	t be read car	efully before filling u	o the form	
То						
The Sec						
WBCRC						
Sir/Mad						
_	I beg to apply Correction of	My Name () / Mido	dle Name 🔾	/Surname	s Name () / Father's Middle	
Name(_)// Father's Surname 🔘 / Motl	ner's Name 🔘 / M	other's Mid	dle Name ()/ Mothe	er's Surname ()/Guardian's	
Name (🔾 / Guardian's Middle Name 🔾	/ Guardian's Surnam	ne 💚 Date	Of Birth ()/Gender ([Please (v) the necessary	
correct	ion], as per		as docur	mentary evidence (s)	duly filled in the following	
particul	lar(s) of the prescribed form thro	ough the concerned	Co-ordinato	or of study centre /Ir	stitution requisite fee of Rs	
	(Rupees		_ only)			
1. Parti	culars of the Applicant as per Re	gistration Certificate	e/Admit Care	d /Marksheet/Pass C	ertificate of Madhyamik	
(Second	dary) Level					
a.		ame (in capital letters)				
b.	Father's/ Mother's / Guardian's name					
C.	Date of Birth [DD-MM-YYYY]					
d.						
	Secondary) Level					
e.	Age as on date of admission in	Madhyamik		The state of the s		
	(Secondary) Level					
f.	Registration No and Year					
g.	Roll		No			
h.	Name of Council's Examination	A CONTRACTOR OF THE CONTRACTOR				
11.						
i.	(appeared / passed)					
1.	Address of applicant (in full)				* * * * * * * * * * * * * * * * * * * *	
	NA-L'I	3				
j.	Mobile no.		1.		2.	
k.	E-mail id	-				
		9				
			•			
2. Partic	culars of the Institution Study Co	entre /Institution				
Study centre code No Name of the Study Centre						
					*	
Address	(in full)					
,						
Contact	no of Study Centre /		E-mail id			
Co-ordin	nator/H.M./T.I.C				a)	

3.	Correc	tion	Prayed	for

	From	То
Name/Middle name/ Surname of the Applicant		
Name/ Middle name /Surname of Father's /Mother's/Guardian's		
Date of Birth		
Gender		

Gender					
4. The Co-ordinator/ H.M./T.I.C. of the stud	y centre is requested	d to exp	lain how the m	istake occurre	ed:
					8
			d and forwarded sideration of nec		
Signature of the Applicant (in full)					
Counter signed by D.I/A.D.I/ A.I (SE) of School(s) with soal & data				
counter signed by buy Albuy Ali (32) of sellook.	s, with sear & date				
		Signa	ture of the Co-	ordinator wi	th seal & date
Demand draft No. with date					
Amount (in words)					
Name of the Bank & Branch	***************************************				
				v ·	
		Signa	ature of the H.I	M./T.I.C with	seal & date
Payment should be made by					
Bank Challan of WBCROS (which					
has been uploaded at our website					
our wbcros.ac.in).					
			entre's contact		
		Study	Centre's mail Id:		
	FOR OFFICE	USE			
Observation					
Justi Valion					
				*	

Instruction to the applicant before filling up the Form (No. WBCROS/02) for correction for Uchcha Madhyamik (Higher Secondary) Level

Documents to be submitted

- 1. Photocopy to Registration Certificate, Admit Card, Mark Sheet and Pass Certificate duly authenticated by the concerned Head of the Study Centre's/Institution's Co-ordinator/H.M./T.I.C.
- 2. For Correction of Name/Father's/Mother's Name/ Guardian's name/ Middle Name/ Surname/ Date of Birth Photo copy of Registration Certificate/Admit Card /Marksheet/Pass Certificate for Madhyamik (Secondary) Level must be authenticated by the concerned Co-ordinator/H.M./T.I.C. of the Study Centre/ Institution and countersigned by D.I./A.D.I./A.I (SE) of Schools.
- 3. On checking application form if any discrepancy arises/found correction form should be treated as cancelled by the WBCROS.
- 4. Any correction must be done within one year of registration.

5. Auxiliary documents :-

i) Photo copy of Baptism Certificate for students, ii) Photocopy of Discharge Certificate and Caste Certificate (must be prepared before Registration /appearing Council's Examination and issued by the competent authority) attested by Gazette Officer.

6. In case of Gender Change

i) Photocopy of Certificate of sex Reassignment Surgery (SER) from competent Government Medical Officer within the one year of Registration.

FEES - within three months - Nil

Within one year – 100 (Registration Certificate, Mark sheet / Certificate) + Rs 25/-(processing fees) for each subject

Within one year -100 (Admit card) + Rs 25/- (processing fees) = 125/-

N.B.:

- 1) Prayer for any type of correction shall not be entertained, if he/she provides false information(s)/document(s) or incorrect information(s) /document(s).
- 2) Incomplete / tampered documents will not be entertained.
- 3) Photo copy of Registration Certificate/Admit Card /Marksheet/ Pass Certificate for Madhyamik (Secondary) Level must have been authenticated & signed by the concerned Co-ordinator/H.M./T.I.C. of the Study Centre/ Institution properly.
- 4) Applicants who are applying for any correction/s after one year from the year of Registration must be obtain prior permission from the Council's authority.
- 5) The Council shall not however be responsible for the delay in preparing of any correction due to unavoidable circumstances.
- 6) Complaints for non –receipt of the documents will not be entertained after a period of 3 months from the date of submission.
- 7) If not Received within one month from submission aggrieved incumbent may write to the Secretary, WBCROS at email id wbcros2006@gmail.com

By Order Secretary