



Since - 2011

Karkare Academy Competitive Exam KACE

Seat No: (not to be filled by students)

Fill in all the details in **block letters** :

Name of the student :

Address :

Name of the school :

Mobile No. :

E-mail ID :

Standard : (✓)

2nd

3rd

4th

5th

6th

7th

8th

Mode of Payment : Fee ₹300/- (Three hundred only)

Cash : Cheque No. Bank Name : _____

Exam will be held on 1st or 2nd sunday of February.

Principal's Sign. & Stamp

Parents Signature



Since - 2011

KACE Hall Ticket

Seat No :

Standard :

Block No :

Floor No :

Students Name :

Exam Centre :

Exam Date :

Exam Time : 11:30 AM to 12:45 PM

For KARKARE ACADEMY

Proprietor