



BOARD OF INTERMEDIATE & SECONDARY EDUCATION MARDAN

SSC/HSSC PART-I (9th/1st Year) RESULT CANCELLATION FORM

To: The Chairman,
BISE, Mardan.

Subject: - APPLICATION FOR RESULT CANCELLATION

Sir,

With great respect it is stated that I have appeared in Part-I SSC/HSSC (Annual) Examination 20__
under Roll number _____ from (School/College) Name: _____

I am not satisfied with my result and want to cancel it.

Kindly cancel my above mentioned result which I will not claim it in future.

I have deposited Rs. _____ Receipt No. _____ Dated: _____ ABL/UBL _____

Yours obediently

Roll NO. _____ Name: _____ Signature of Student _____

Father Name _____ Father /Guardian Signature _____

CNIC NO. _____ Contact No. _____

Address _____

N.O.C from the Institutions Concerned

Certified that the applicant Mr./Miss _____ S/o, D/o _____
is a regular student of this Institution and the above mentioned cancellation is recommended
accordingly.

Signature of the Principal

Office Seal

Contact Number.

Requirements:

1. Father CNIC Copy.
2. Affidavit for not claiming the previous result in future.
3. Original DMC.
4. Fee Rs. **3000/-**