



**MEGHALAYA BOARD OF SCHOOL EDUCATION**  
**SECONDARY SCHOOL LEAVING CERTIFICATE EXAMINATION, 2025**  
**PRE-PRINTED APPLICATION FORM**  
**(REGULAR CANDIDATES)**

Photo copy of the UDID card is to be attached if you are a disabled candidate.

Form No: **20009001**

Type: **Regular-II**

Examination Centre: **UMSNING**

Institution: **Evershine English Secondary School, Lumnongrim**

Reg. No: **68551** of **2023**

Sex: **Male**

Category: **ST**

Community: **Khasi**

Date Of Birth: **25-Sep-2007**

Name: **LANDONDOR KHARBUKI**

Father's Name: **HERCULES MAWLONG**

Mother's Name: **HELENA KHARBUKI**

Home Address (IN BLOCKS LETTERS ONLY)(Do not repeat Name)

.....  
 .....  
 .....Contact No.....

**Subject Opted (Other Than Compulsory Subjects):**

If subject was changed with prior permission from the Board, attach permission/NOC of the Board.

**Subject Taken**

**Subject Changed to**

**1: HPE**

.....

**2: Kh**

.....

For Candidates of Regular-1 & Regular-2	
Work Experience	Creative Expression
Physical Education	Environmental Education



**IMPORTANT: Back page of this REGULAR form should be printed, and signed by all concerned before submitting to the Board.**



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Form No: **20009002**

Type: **Regular-II**

Examination Centre: **UMSNING**

Institution: **Evershine English Secondary School, Lumnongrim**

Reg. No: **68550** of **2023**

Sex: **Male**

Category: **ST**

Community: **Khasi**

Date Of Birth: **05-Nov-2006**

Name: **GERALD THABAH**

Father's Name: **PYNTINGENLANG NONGBSAP**

Mother's Name: **ARMANTI THABAH**

Home Address (IN BLOCKS LETTERS ONLY)(Do not repeat Name)

.....  
 .....  
 .....Contact No.....

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*G. Thabah*

Signature of the applicant

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Form No: **20009003**

Type: **Regular-II**

Examination Centre: **UMSNING**

Institution: **Evershine English Secondary School, Lumnongrim**

Reg. No: **68552** of **2023**

Sex: **Female**

Category: **ST**

Community: **Khasi**

Date Of Birth: **10-Dec-2007**

Name: **BAIOHLIN KHARMYNDAI**

Father's Name: **SHADIROY KHARNAIOR**

Mother's Name: **SHITALIN KHARMYNDAI**

Home Address (IN BLOCKS LETTERS ONLY)(Do not repeat Name)

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 .....

.....Contact No.....

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