## APPLICATION FOR SELF INSPECTION OF EVALUATED ANSWER SCRIPT(S)

The Secretary Tripura Board of Secondary Education P. N. Complex, Gurkhabasti, Agartala. ( Through the Head of the Institution )  Sir, I would like to self-inspect					
			2. Address		
			Post OfficeDistt.		
4. Name of the Examination and Year					
			Subjects sought for <b>Self Inspection</b>	Subjects sought for <b>Review</b> ( if	any)
			1	1	
3	3				
4	4				
5	5				
6	6				
7    Declaration – I declare that the above statements to be not true, my application shall be liable to Secondary Education without any intimation to m fees in any event.	be rejected by the Secretary, Tripura	Board of			
Countersignature of the Headmaster/Headmistress of the School with seal.	Full signature of the Examinee	with date			
DL	Full signature of Father/Mo Legal guardian with date	ther/			