[On School Letter head]

[Outward No]	
Date:	
To,	
The Regional Officer	
Central Board of Secondary Educa	ation,
Regional Office Address With Pin	n code
Affiliation No.:	School Code:
Dear Sir/Madam,	
and School code] Centre in the su [From {Date} to {Date}] in [No. of Certificate Examination, [Year].	ended Practical Examination at [School Name abject [Subject name & Code] on the dates of Batches] sessions in Senior School
reference and procedure.	lls are enclosed herewith for your kind
 Answer sheets from serial n Attendance Sheet Century List Examiner Report 	number : to
Kindly find the same in order and	acknowledge the receipt.
Signature of Examiner:	
Name of Examiner	
Examiner Number	
PGT – Subject name & Code	

School Name of Examiner