ICST INTERNATIONAL OLYMPIAD EXAMINATION 2025

CLASS	MEDIUM	GENDER		CANT'S DOB	ROLL NO.	
		(M/F)	(DD-	MM-YYYY)	(DO NOT FILL)	- -
						APPLICANT'S PHOTOGRAPH
						DO NOT PASTE
APPLICANT'S NAME (BLOCK LETTER)						
FATHER'S NEME						
MOTHER'S NAME						
INSTITUTION NAME						
INSTITUTION ADDRESS						
DISTSTATE						
PIN						
SIGNATURE OF APPLICANT CO- ORD			CO- ORD	INATOR	SIGNATURE OF HEAD	
APPLICANTS COPY						
ICST INTERNATIONAL OLYMPIAD EXAMINATION 2025						
APPLICANT'S NAME (BLOCK LETTER)						
FATHER'S NEME						
MOTHER'S NAME						
INSTITUTION NAME						
EXAM DATE			GRADE:			
L				A+ = 96-100 A = 91-95		
				B+ = 86-90		
EXAMINATIO	N CENTER		B = 76-85			
				C+ = 40-65		
				D = 0-39		