



UNIFIED INTERNATIONAL ENGLISH OLYMPIAD - 2015



UNIFIED COUNCIL

INDIA'S 1st ISO 9001 : 2008 Certified
Organisation in Testing & Assessment

SCHOOL REGISTRATION FORM

School Name : _____

School Address : _____

Place _____ District _____

State _____ Pin Code _____

School Phone Number (with STD code) : _____

Fax : _____ E-mail : _____

Name of the Principal (Mr. Mrs. Ms.) : _____ * Mobile No. _____

Name of the Teacher in-charge (Mr. Mrs. Ms.) : _____ * Mobile No. _____

(We use mobile number for all updates of UIEO through SMS)

Syllabus of followed : _____
(CBSE/ICSE/State Board (Specify))

D.D.No. _____ Name of the Bank: _____ Amount _____

Unified Council's
Regional Co-ordinator ID No. & Name
(if anybody approaches) : _____

Class	2	3	4	5	6	7	8	9	10	Total No. of Students
No. of Students										
No. of Students opting set of M.Q.P.										

Signature of the Teacher in-charge

Signature of the Principal
with school seal

*** Please provide us your mobile number for receiving effective services.**

Please turn overleaf

