

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817001****ADMISSION CARD**

Name of the candidate	KRISHNA POTTEKKAT
Name of the School	SH OF MARY'S CGHS KANDASSANKADAV
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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an Institute of SCERT Kerala**ROLL No:0817002****ADMISSION CARD**

Name of the candidate	VISHNU K B
Name of the School	ANMUPS MANITHARA
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

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an initiative of SCERT Kerala**ROLL No:0817003****ADMISSION CARD**

Name of the candidate	NIRANJAN V S
Name of the School	GUPS VARADIYAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

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Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

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an Institute of SCERT Kerala**ROLL No:0817004****ADMISSION CARD**

Name of the candidate	ELIZABATH THOMAS
Name of the School	NCUPS AYYANTHOLE
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

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Name of the School	
Name of the Revenue District	

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an Institute of SCERT Kerala**ROLL No:0817005****ADMISSION CARD**

Name of the candidate	DENNY DAVIS
Name of the School	ST ALOYSIUS ELTHURUTH
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

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Name of the Revenue District	

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an Institute of SCERT Kerala**ROLL No:0817006****ADMISSION CARD**

Name of the candidate	ISHA ROSE
Name of the School	IJGHS ARANATTUKARA
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

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Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

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Name of the candidate	DEVADARSAN V R
Name of the School	NCUPS AYYANTHOLE
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

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Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

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Name of the candidate	BHADRA M U
Name of the School	CKC GHS PAVARATTY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

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Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

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an Institute of SCERT Kerala**ROLL No:0817009****ADMISSION CARD**

Name of the candidate	NAIMA RUMANATH
Name of the School	GHSS ELAVALLY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

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Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

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an Institute of SCERT Kerala**ROLL No:0817010****ADMISSION CARD**

Name of the candidate	LIBIN BABY
Name of the School	V V U P S PADOOR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

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Name of the candidate	SAYANA C U
Name of the School	CKC GHS PAVARATTY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

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Name of the candidate	ELSA TJ
Name of the School	St.Sebastians CGHS, Nellikkunnu
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

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Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

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an Institute of SCERT Kerala**ROLL No:0817013****ADMISSION CARD**

Name of the candidate	HARINANDANA K S
Name of the School	ST. GEORGE UPS MUKKATTUKARA
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

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Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

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Name of the candidate	TESSA K H
Name of the School	ST RAPHEAL CGHSS, OLLUR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

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Name of the candidate	ALNA JOSE
Name of the School	SUPS KOZHUKKULLY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

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an Institute of SCERT Kerala**ROLL No:0817016****ADMISSION CARD**

Name of the candidate	RITHWISHA C S
Name of the School	SUPS KOZHUKKULLY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
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(The photograph
should be
endorsed by the
Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817017****ADMISSION CARD**

Name of the candidate	BENCHAMIN M THOMAS THAMPI
Name of the School	GHSS PECHI
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817018****ADMISSION CARD**

Name of the candidate	APSARA T P
Name of the School	ST JOSEPHS' CGHSS THRISSUR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817019****ADMISSION CARD**

Name of the candidate	ADIL ISAC BENNY
Name of the School	GVHSS PUTHUR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817020****ADMISSION CARD**

Name of the candidate	JOEL JOSHY
Name of the School	ST MARYS' CUPS CHIYARAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817021****ADMISSION CARD**

Name of the candidate	Ragenthu E.R.
Name of the School	St. Mary's CGHS Ollur
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817022****ADMISSION CARD**

Name of the candidate	T.R. Sreelakshmi
Name of the School	St. Mary's CGHS Ollur
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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endorsed by the
Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817023****ADMISSION CARD**

Name of the candidate	Neha Rose Toby
Name of the School	St. Mary's CGHS Ollur
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017 from 10.30am to 11.30am**Venue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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an Institute of SCERT Kerala**ROLL No:0817024****ADMISSION CARD**

Name of the candidate	Avanthika M.A.
Name of the School	St. Teresita's UPS Thalore
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017 from 10.30am to 11.30am**Venue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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photograph
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should be
endorsed by the
Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817025****ADMISSION CARD**

Name of the candidate	Devitha Dileepkumar
Name of the School	St. Teresita's UPS Thalore
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817026****ADMISSION CARD**

Name of the candidate	Sooktha V.S.
Name of the School	SNMHSS Chazhur
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017 from 10.30am to 11.30am**Venue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817027****ADMISSION CARD**

Name of the candidate	Adithya P.R.
Name of the School	GUPS Vallachira
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an initiative of SCERT Kerala**ROLL No:0817028****ADMISSION CARD**

Name of the candidate	Pradeesha K.B.
Name of the School	St. Pius Xth CUPS Varandrappilly
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Head of the
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an Institute of SCERT Kerala**ROLL No:0817029****ADMISSION CARD**

Name of the candidate	Emin Mariya A.J.
Name of the School	SNMHSS Chazhur
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817030****ADMISSION CARD**

Name of the candidate	C.J.JITHIN
Name of the School	ST. MARYS GHS KUZHIKATTUSSERY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017 from 10.30am to 11.30am**Venue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817031****ADMISSION CARD**

Name of the candidate	NIRANJANA DILEEP
Name of the School	DPMUPS CHAKKAMPARAMBU
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
photograph
(The photograph
should be
endorsed by the
Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817032****ADMISSION CARD**

Name of the candidate	ANANTHUKRISHNA V B
Name of the School	ST. MARYS GHS KUZHIKATTUSSERY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017 from 10.30am to 11.30am**Venue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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endorsed by the
Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817033****ADMISSION CARD**

Name of the candidate	RESMI T R
Name of the School	SNDPHS PALISSERY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817034****ADMISSION CARD**

Name of the candidate	GRACE JOSHY
Name of the School	ST.ANTONY'S CUPS ELINJIPRA
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an initiative of SCERT Kerala**ROLL No:0817035****ADMISSION CARD**

Name of the candidate	JITHIN JOHNSON
Name of the School	LFCGHS KORATTY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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an initiative of SCERT Kerala**ROLL No:0817036****ADMISSION CARD**

Name of the candidate	KRISTEENA V B
Name of the School	GHSS CHEMBUCHIRA
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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an Institute of SCERT Kerala**ROLL No:0817037****ADMISSION CARD**

Name of the candidate	BHADRA RAJAN
Name of the School	SHCGHSS CHALAKUDY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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an Institute of SCERT Kerala**ROLL No:0817038****ADMISSION CARD**

Name of the candidate	DEVANANDHA SUNANDH
Name of the School	SHCGHSS CHALAKUDY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817039****ADMISSION CARD**

Name of the candidate	ANAMIKA A S
Name of the School	GGHS Chalakudy
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817040****ADMISSION CARD**

Name of the candidate	ASWIN T
Name of the School	DBGHS KODAKARA
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817041****ADMISSION CARD**

Name of the candidate	SYAMA MANU
Name of the School	MRS CHALAKUDY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817042****ADMISSION CARD**

Name of the candidate	NANDANA P B
Name of the School	GGHSS KODUNGALLUR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817043****ADMISSION CARD**

Name of the candidate	DHANALAKSHMI K M
Name of the School	GGHSS KODUNGALLUR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817044****ADMISSION CARD**

Name of the candidate	GAYA T M
Name of the School	GGHSS KODUNGALLUR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817045****ADMISSION CARD**

Name of the candidate	AMEER ADAM K K
Name of the School	AMUPS PAPPINAVATTYAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817046****ADMISSION CARD**

Name of the candidate	FIDAL M SREEDHAR
Name of the School	UPS KARALIPARAMBU
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
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should be
endorsed by the
Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817047****ADMISSION CARD**

Name of the candidate	DEVADATH K
Name of the School	AMUPS PAPPINAVATTYAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an initiative of SCERT Kerala**ROLL No:0817048****ADMISSION CARD**

Name of the candidate	ARATHY K M
Name of the School	ST. JOSEPH'S HSS MATHILAKAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817049****ADMISSION CARD**

Name of the candidate	ABHIJITH K S
Name of the School	GKVHSS ERIYAD
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817050****ADMISSION CARD**

Name of the candidate	BIJITH.A.B
Name of the School	SKHSS ANANDAPURAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817051****ADMISSION CARD**

Name of the candidate	ROSHIN
Name of the School	SKHSS ANANDAPURAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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an Institute of SCERT Kerala**ROLL No:0817052****ADMISSION CARD**

Name of the candidate	UPANNYA UTHAMAN
Name of the School	BVMHS KALLETUMKARA
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017 from 10.30am to 11.30am**Venue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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an Institute of SCERT Kerala**ROLL No:0817053****ADMISSION CARD**

Name of the candidate	NAMITHA SANTHOSH
Name of the School	LCUPS IRINJALAKKUDA
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017 from 10.30am to 11.30am**Venue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817054****ADMISSION CARD**

Name of the candidate	DEVIKA.P.S
Name of the School	MUPS PORATHISSERY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
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Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817055****ADMISSION CARD**

Name of the candidate	SANDRA JOJI
Name of the School	LCUPS IRINJALAKKUDA
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817056****ADMISSION CARD**

Name of the candidate	ANANDU.V.S
Name of the School	GHSS NANDIKKARA
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

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an Institute of SCERT Kerala**ROLL No:0817057****ADMISSION CARD**

Name of the candidate	DEVI KR
Name of the School	SNSUPS PERINJANAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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an Institute of SCERT Kerala**ROLL No:0817058****ADMISSION CARD**

Name of the candidate	AISHA K
Name of the School	HST ANNES CUPS EDATHIRUTHY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817059****ADMISSION CARD**

Name of the candidate	ANJANA KRISHNA
Name of the School	GFUPS KOTTAKADAPURAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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an Institute of SCERT Kerala**ROLL No:0817060****ADMISSION CARD**

Name of the candidate	SANYA RAJ
Name of the School	H S CHENTRAPPINI
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017 from 10.30am to 11.30am**Venue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817061****ADMISSION CARD**

Name of the candidate	HRIDYA H BHAT
Name of the School	ST.PIUS X TH UPS WADAKKANCHERY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017 from 10.30am to 11.30am**Venue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

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Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817062****ADMISSION CARD**

Name of the candidate	ASWIN C.M
Name of the School	GBHSS WADAKKANCHERY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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endorsed by the
Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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an Institute of SCERT Kerala**ROLL No:0817063****ADMISSION CARD**

Name of the candidate	ABHEESH A.M
Name of the School	GBHSS WADAKKANCHERY
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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an Institute of SCERT Kerala**ROLL No:0817064****ADMISSION CARD**

Name of the candidate	DENNA DAVIS
Name of the School	LFGHSS CHELAKKARA
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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an Institute of SCERT Kerala**ROLL No:0817065****ADMISSION CARD**

Name of the candidate	ABHIJITH K.R
Name of the School	GUPS KILLIMANGALAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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an Institute of SCERT Kerala**ROLL No:0817066****ADMISSION CARD**

Name of the candidate	HIBA NASRIN.K.A
Name of the School	GHSS VARAVOOR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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an Institute of SCERT Kerala**ROLL No:0817067****ADMISSION CARD**

Name of the candidate	SREELAKSHMI C.N
Name of the School	GUPS KILLIMANGALAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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an Institute of SCERT Kerala**ROLL No:0817068****ADMISSION CARD**

Name of the candidate	JATHAVEDAN.T
Name of the School	A.U.P.S GURUVAYOOR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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an Institute of SCERT Kerala**ROLL No:0817069****ADMISSION CARD**

Name of the candidate	ARJUN.M.R
Name of the School	A.U.P.S GURUVAYOOR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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an Institute of SCERT Kerala**ROLL No:0817070****ADMISSION CARD**

Name of the candidate	SHAGI.G.PARAMEL
Name of the School	LFCGHSS MAMMIYOOR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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an Institute of SCERT Kerala**ROLL No:0817071****ADMISSION CARD**

Name of the candidate	VISMAYA T.V
Name of the School	ST.SEBASTIAN'S H.S CHITTATTUKARA
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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an Institute of SCERT Kerala**ROLL No:0817072****ADMISSION CARD**

Name of the candidate	AMINA.C.M
Name of the School	G.H.S.S KOCHANNUR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817073****ADMISSION CARD**

Name of the candidate	ATHUL KRISHNA.T.H
Name of the School	ST.FRANCIS UPS VYLATHUR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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an Institute of SCERT Kerala**ROLL No:0817074****ADMISSION CARD**

Name of the candidate	DEVANAKRISHNA M.S
Name of the School	VRAMMHSS THAIKKAD
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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an initiative of SCERT Kerala**ROLL No:0817075****ADMISSION CARD**

Name of the candidate	ATHMAJ.G.AJITH
Name of the School	ST.MARY'S GHS CHOWANNUR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

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Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

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an Institute of SCERT Kerala**ROLL No:0817076****ADMISSION CARD**

Name of the candidate	KEZIYA.C.SAJIMON
Name of the School	ST.MMC UP SCHOOL KANIPAYYUR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817077****ADMISSION CARD**

Name of the candidate	HEMANTH.E.S
Name of the School	ST.MMC UP SCHOOL KANIPAYYUR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017 from 10.30am to 11.30am**Venue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
photograph
(The photograph
should be
endorsed by the
Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
photograph
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817078****ADMISSION CARD**

Name of the candidate	CHANDINI T.P
Name of the School	HCCGUPS CHERALAYAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017 from 10.30am to 11.30am**Venue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
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an Institute of SCERT Kerala**ROLL No:0817079****ADMISSION CARD**

Name of the candidate	ALNA STEPHEN
Name of the School	HCCGUPS CHERALAYAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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photograph
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817080****ADMISSION CARD**

Name of the candidate	RHITHVIK PRASAD
Name of the School	SMUPS ERINGAPURAM
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
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Head of the
Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

**STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an initiative of SCERT Kerala**ROLL No:0817081****ADMISSION CARD**

Name of the candidate	SREELAKSHMI.K.M
Name of the School	LIGHS CHOONDAL
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****ROLL No:****IDENTIFICATION CERTIFICATE**

Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____ Contact Ph. No. _____

Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**

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Kerala-695 012. Website www.scert.kerala.gov.in, e-mail scertkerala@gmail.com*Passport size
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Institution)***NURTURING MATHEMATICAL TALENTS IN SCHOOLS (NuMATS)****State Level Aptitude Test – 2017****NuMATS**
an Institute of SCERT Kerala**ROLL No:0817082****ADMISSION CARD**

Name of the candidate	RHISHIKESH MANOJ
Name of the School	ST.MMC UP SCHOOL KANIPAYYUR
Name of the Revenue District	Thrissur

Full Postal Address of Candidate *(To be filled by candidate)*

_____ Pin Code _____

Date of Examination : **04.02.2017** from 10.30am to 11.30amVenue of Examination : **CHALDEAN SYRIAN HSS THRISSUR****Attested by the Head of the School** *(with Office Seal)***Signature of the Candidate****STATE COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING (SCERT)**Vidyabhavan, Poojappura, Thiruvananthapuram
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Name of the candidate	
Name of the School	
Name of the Revenue District	

Full Postal Address of Candidate *(To be filled by candidate)*

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Date of Examination

Venue of Examination :

Attested by the Head of the School *(with Office Seal)***Signature of the Candidate**