

9. Mailing Address

10. Permanent Address

For Language II a candidate may choose any one of the languages from the following list:

11. Write the name and code no. of Mother Tongue for Language II from the given list:-

Code No.	List of Languages (Mother Tongue)	Code No.	List of Languages (Mother Tongue)
01.	Ao	010.	Phom
02.	Chang	011.	Pochury
03.	Chokri (Chakhesang)	012.	Nthenyi (Rengma)
04.	Kuzhale (Chakhesang)	013.	Nzonkhwe (Rengma)
05.	Khiamniungan	014.	Sangtam
06.	Kuki	015.	Sumi
07.	Konyak	016.	Tenyidie
08.	Liangmai	017.	Yimkhiung
09.	Lotha	018.	Zemi
		019.	Hindi

12. DECLARATION TO BE SIGNED BY THE CANDIDATE

I hereby declare that the information given by me in the Application form is true, complete and correct to the best of my knowledge and belief and that nothing has been concealed or distorted. If at any time, I am found to have concealed/distorted any information or given any false statement, my application shall be summarily rejected.

Note: 1. The signature used in the application form and in the attendance sheet must be same.

2. **The candidates are required to download the appropriate Admit Card for respective Papers and fill in the given spaces except Application Form No., Roll No. and Centre of Examination.**

Date: _____

Place: _____

What's App Contact No: _____

E-mail id : _____

(Signature of the Applicant)



**STATE COUNCIL OF EDUCATIONAL RESEARCH & TRAINING, NAGALAND : KOHIMA
STATE ACADEMIC AUTHORITY**

**ADMIT CARD FOR NAGALAND TEACHER ELIGIBILITY TEST (N-TET) Oct 2023.
CATEGORY : PRIMARY (PAPER - I)**

DATE OF EXAMINATION	PAPER	TIMING
07 - 10 - 2023	PAPER - I	10: 30 A.M - 12: 00 Noon

PHOTO

APPLICATION FORMNO :

ROLLNO :

CANDIDATE'S NAME :

FATHER'S NAME :

Signature of the candidate

MALE/FEMALE :

Mother Tongue CODE :

DATE OF BIRTH :

CENTRE OF EXAMINATION :

**Director,
State Academic
Authority.**



**STATE COUNCIL OF EDUCATIONAL RESEARCH & TRAINING, NAGALAND : KOHIMA
STATE ACADEMIC AUTHORITY**

**ADMIT CARD FOR NAGALAND TEACHER ELIGIBILITY TEST (N-TET) Oct 2023.
CATEGORY : UPPER PRIMARY (PAPER – II)**

DATE OF EXAMINATION	PAPER	TIMING
07 – 10 - 2023	PAPER - II	1: 00 P.M – 2: 30 P.M

PHOTO

APPLICATION FORM NO :

ROLL NO:

CANDIDATE'S NAME :

FATHER'S NAME :

Signature of the candidate

MALE/FEMALE :

Mother Tongue CODE :

DATE OF BIRTH :

SOCIAL SCIENCE
OR
MATHS & SCIENCE

CENTRE OF EXAMINATION :

**Director,
State Academic
Authority.**