

ARJUNA CLASSES

'ACT-FAST' TEST FORM

Name _____

Contact No. Personal _____

Father's Name _____

Father's Occupation _____

Father's Mobile No _____

Mother's Name _____

Mother's Mobile No _____

School Name _____

Permanent Address _____

Class in which you are studying _____

Last Class Marks in Final Exam _____

Your Position In Class (Tick the Column)(1)top 5 _____ (2)5to10 _____ after10) _____

Describe yourself (Mention if any special achievement) _____



Signature of Candidate

.....✂.....✂.....✂.....✂.....✂.....✂.....✂.....

RECEIPT CUM ACKNOWLEDGEMENT

Amount Received _____

EXAM PATTERN

Junior

Total No. of Questions- 80	Durations - 2 Hours	Total Marks - 320	No Negative Marking
80 MCQs: Science-Phy(12),Chem.(12),Bio(12)	Maths 24	Mental Ability - 20	

Senior

Total No. of Questions- 90	Durations - 2 Hours	Total Marks - 320	No Negative Marking
90 MCQs: Science-Phy(15),Chem.(15),Bio(15)	Maths 25	Mental Ability - 20	

Date & Time of Exam

Exam Date :

Timings : 10:30am To 12:30am

Last Date of Applicant-.....

Date of declaration of result for (ACT-FAST).....

Centre _____

Signature of issuing Person

