

**Standard Affidavit Format for Corrections in the Documents Issued by the  
Bihar School Examination Board (BSEB)**

In

The Court of Executive Magistrate ..... (District)

**AFFIDAVIT**

I, ..... (Full Name of the Applicant), Son of  
..... (Father's Full Name) & / or .....  
(Mother's Full Name) and presently residing at Village: ....., Post  
Office....., Police Station: ....., District: ....., Pin  
Code: ..... State ..... do hereby solemnly affirm and declare as under:

1. That, I am a citizen of India.
  
2. That, I have passed the ..... (Secondary / Intermediate / Other)  
Examination, Conducted by ..... (BSEB / erstwhile BIEC) from  
..... (Name of School / College/ Institute),  
bearing Roll code: ....., Roll No ....., in the year ..... and  
Faculty ..... (if applicable).
  
3. That, the following details are wrongly entered in my document(s)  
..... (mention name of  
the document(s) issued by the Board and therefore I request for correction in the said  
documents(s) as per the following details:

Nature of Corrections	Presently entered in my document(s)	Correction required to be done in my document(s)

4. That, my photograph is blank / incorrect in the document(s) issued by the Board. Therefore, I affix my correct photograph with this affidavit for correction in the photograph. I hereby declare that if my photograph is found against my identity as recorded in this affidavit, the Board may cancel all my certificates and take necessary legal action against me (**applicable for correction in the photograph only**).
5. That, I am not in the service of Government or Government funded Institution or in any instrumentality of State (**applicable for correction in the date of birth only**).
6. That, I require duplicate document (s) .....  
(mention name of duplicate document) required after aforesaid correction(s).
7. That, I undertake to submit self-attested photocopies of essential documents for the aforesaid correction(s) and undertake to produce their original(s) for verification.
8. That, all statements of this affidavit are true and correct to the best of my knowledge and belief as explained to me and understood. If found untrue and false, I will be personally liable to be punished in accordance with law.

Place: .....

Date: .....

**Signature of Deponent**

I certify the signature of the Deponent who has signed before me.

**Signature of Advocate**

BCI Enrolment No..... / .....

AOR No.....