

ADMISSION FORM

Date -----

Father's Photo

Mother's Photo

Student's Photo

Student's Name
First Name
Middle Name

Class Section Roll No.

Gender Male Female Blood Group

DOB

Aadhar No.

Father's Name
First Name
Middle Name

Mother's Name
First Name
Middle Name

Father's Qualification Father's Occupation

Mother's Qualification Mother's Occupation

Address

City State

Country Zip code

Last School Name Transfer Certificate No.

Email ID (parents) Parent's Mobile

Weather to avail bus facility Area

Religion Cast

Nationality Category Gen OBC SC ST

Last Class

Parent/Guardian Signature