



-4	

	n D/A	NISSION .	FORM	
Form No.				
Student De				
Student Name :	,,			Space for Photograph
Date of Birth : D	DMMYYYYNote:-A	Attach a Xerox copy of the	e Birth Certificate	
Parent's De	tails		. E	
Father's Name :				
		Contact No		
		Contact No		
Student De				
Address (Present)			-	
			No.: —	
· Mob :	•	— What's App	No.: —	
Last School	ling Info			
Class —	Pa	assed with ———	Years——	
School Name & Ad	ddress :		Note - Attach a Xerox copy of the Transfer Cert	tificate of the previous school
Join Transport Faci	ility Yes□ No□	9 =	Trace Present a result copy of the trainger cer-	interest of the previous serios.
information of me ar aware that it is not re	nd my child. I know that every yea	ar 10% fees is incres vill co-operate to the	ns of the school, I have not mention ed and I have no objection with it. e activities given to my ward. if fail,	Once I pay fees, I am
Signature of the Incharge with			P	arent's Signature
Additional In	fo			
Name & Class of any brother (s) & s	sister (s) already attending the school			
			*	
Local Guardia	n details (if)			
Name :				
Address :				
Contact No :				
Dhysical 9	Medical Info			
			Physical & Med	ilcai inio
	Snace	For Family Phot	tograph	
	Space	. J. Carring Prilo		
	au:	or office u		
		222211121111111111111		
			& Class	
Roll No.			——— Any Special Remark	
Tuition Fee	Conveyance Fee	e (IT)	Security	

Monthly

Made of Fee - Yearly