

14. E-mail Id: _____ Facebook Id: _____

15. whatsapp number: _____

16. Religion:

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17. Caste: _____

18. Category: GEN[] SC[] OBC[] ST[] (Please mark(✓) tick in the appropriate box)

19. Nationality:

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20. Sibling's Detail:

Name: _____ Age: _____ Class: _____

School: _____

Name: _____ Age: _____ Class: _____

School: _____

21. Likes of student: _____

22. Dislikes of student: _____

23. Any information regarding the health of student , which is necessary : _____

Note: -I here declare that the particulars furnished above are true to the best of my knowledge and belief in the information is found to Be false or incorrect; I understand that my candidate will be cancelled.

Date: _____ Place: _____

Parent's/Guardian's Signature _____

For office use only :-

Check list:

From filled duly: _____

Photograph Pasted: _____

Parents Sign: _____

Birth Certificate Deposited: _____

Attached forms filled duly: _____

Principal
(sign& seal)