Add Student

Name *		
	First Name	Last Name

Date of Birth *   dd-MMM-yyyy 🗓

Age   #######

Gender *   ⦿ Male   ◯ Female

Photo *   Select Image ⬆ 🔗

Date of Joining *   dd-MMM-yyyy 🗓

Nationality

Phone Number   🇮🇳 +91 ▾   81234 56789

Email   ✉

Address *
Address Line 1
Address Line 2

Email   ✉

Address *
Address Line 1
Address Line 2
City / District   State Province
Postal Code   -Select- ▾   Country

Parent/Guardian Details

Name *		
	First Name	Last Name

Occupation *

Mobile *   🇮🇳 +91 ▾   81234 56789

Email   ✉

Previous Institute Details

Institute Name

Percentage Scored   %

Last Date   dd-MMM-yyyy 🗓

Certifications   Select File ⬆

Last Date   dd-MMM-yyyy 🗓

Certifications   Select File ⬆

[Submit]   [Reset]

Students

🔍 ➕ ▼ ☰

👁 ☐	Photo	▾	Registration Number ▾	Name ▾	Date of Birth ▾	Mobile ▾
			1	Mahindra J	27-Aug-2004	+914326635315