



SHISHU BHARTI

FORBESGANJ

Araria (Bihar)

Ph.: 06455-225569

Sl. No.

Admn. Date :

Admission Form

(Parents are requested to fill in the admission form with the utmost possible accuracy.
No subsequent change will be permitted thereafter for any reason whatsoever.)

Affix a recent
photograph
of your ward.

I hereby apply for the admission of my ward Master/Miss
..... into class as
per the details given below.

I agree to abide by rules/regulations framed/changed without any
reference/concurrence to and hereby give up all rights/claims now and in future to challenge
any of these in any way legal or otherwise whatsoever.

Parent's/Guardian's Signature

1. Name of the Student _____
(in capital Letters)
2. Date of birth _____ Birth place _____
3. The class for which admission is sought _____
4. Details of the prior education if any _____
5. Religion _____
6. Father's Name _____ Edu. Qualification _____
(in capital Letters)
7. Mother's Name _____ Edu. Qualification _____
8. Permanent/Residential address _____
_____ Telephone No. _____
9. Address (office/shop/business premises) _____
_____ Telephone No. _____
10. Guardian's Name (if parents do not reside here) _____
relationship _____
11. Any physical disability/ailment _____

P.T.O.