

Pan No.: 602459262

Registration No.: 130839/071/072

ADMISSION FORM

Student Information:			
Student's Name (Capital Let	ters):		
Date of Birth: Day	. Month	Year B.S.	Photo
Day	Month	Year A.D.	
Gender: Male	Female Nationality:		
Previous School:		Address:	
Contact:	Percentage / Grade:	Completed G	rade:
Seeking Admission In:			
Permanent Address:			
Province:	District:	Municipality:	
Address:		1	Ward No.:
Current Address:			
Province:	District:	Municipality:	
Address:			Ward No.:
Parent / Guardian Detail	s:		
Father's Name:		Occupation:	
Email Address:		<mark></mark> Contact: <mark></mark>	
Mother's Name:		Occupation:	
Email Address:		Contact:	
Local Guardian's Name:		Contact:	
I	shall abide by the rules and reg	gulations of the Institute.	
Parents's Signature:	Student's Signature:		
Date:	C)ate:	
	(For Office Use	e Only)	
The above student is recomme	ended for admission in grade		
School Coordinator		Principal	