



Al Ghazali High School

Student Information Form

Area 36-B, Double Road, Landhi Town, Korangi, Karachi, Pakistan

Phone: +92 321 9230035, Email: ar3584158@gmail.com

Session 20__-20__

GR No / Roll No: /

Passport
size
photo

Full Name:																			
Father Name:																			
Date of Birth:				-				-											
Admission For:																			
Any Medical Condition:																			
Gender:																			

Student B-Form No:						-								-					
Father CNIC:						-								-					
Nationality:																			
Former Education:																			
Last Exam %																			
Previous Institute Name																			
Full Address:																			
Phone Number:						-													
WhatsApp Number:						-													
Email Address:																			
Guardian Name:																			
Guardian Contact:						-													
Guardian CNIC:						-								-					
Guardian Relation:																			

Student Signature

Parent/Guardian Signature

Principal Signature