Application No. ||||||||||||||||||||||
100002

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* Name   * VikashSiblig
* Nick Name   * ss
* Class   * First
* Section   *
* Registration No.   *
* Admission No   *
* Date Of Admission   * 01-01-1970
* Date Of Activation   * 01-01-1970
* Category   *
* Religion   *
* Date Of Birth   * 12-12-2019
* Mobile No.   *
* Aadhaar No.   * 123322334433
* Email   *
* Gender   * Male
* House Name   *
* State   *
* City   *
* Permanent Address   *
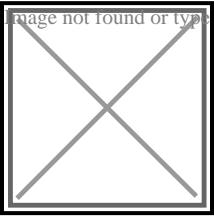* Permanent Pincode   *
* Correspondence Address   *
* Correspondence Pincode   *

Subjects Details

Subject Name	ISOptional
Physics	Compulsory
Chemistry	Compulsory
Mathematics	Compulsory
Biology	Compulsory
English	Compulsory
PSycology	Compulsory
Genral Knowledge	Compulsory
Hindi	Compulsory
Genral Knowledge	Compulsory
Hostory	Compulsory
PSycology	Compulsory

Document Details

Document Name
Adhar Card