

Pincode

• 122101

Student Details

• Name	 Vikash Kumar 	 Date Of Birth 	• 30-10-2016
 Nick Name 	• CHAUHAN	 Gender 	• Male
• Class	• First	 Mobile No. 	• 8210228581
 Section 	• Section A	Aadhaar No.	• 66666666666
 Registration No. 	• ESGE1234	• Email	vikashkumar@gmail.com
Admission No.	• 11001235	 Category 	• OBC
 Date of Admission 	• 30-11-2019	 Religion 	• Muslim
 Date of Activation 	• 01-05-2019	House Name	• Blue
Permanent Address	• Loharu Rd, Shiv Nagar Colony, Krishna Colony, Bhiwani, Haryana 127021		
 Correspondence 			
Address	 Loharu Rd, Shiv Nagar Colony, Krishna Colony, Bhiwani, Haryana 127021 		
Permanent Pincode	• 122101		
 Correspondence 			

Mother's Details

 Nandi Devi Date Of Name • 01-01-1970 Anniversary Mobile No. • 7903436369 • 12000-80000 Annual Income • vikashkumar@gmail.com Farmer Email Profession Education B.SC BCA MCA Yes Alive Date of Birth • 01-01-1970 Office Address • Loharu Rd, Shiv Nagar Colony, Krishna Colony, Bhiwani, Haryana 127021 Organization Name • Loharu Rd, Shiv Nagar Colony, Krishna Colony, Bhiwani, Haryana 127021 Designation Loharu Rd, Shiv Nagar Colony, Krishna Colony, Bhiw **Grand Father's Details** • Moshfir Chauhan Date Of • 01-01-1970 Name Anniversary Mobile No. • 7903436369 • 12000-80000 Annual Income Farmer Email ddsds@ya.com Profession Education VV Yes Alive Date of Birth • 01-01-1970 Office Address ddfvvdzfrsf desf ddfvvdzfrsf desf Organization Name Designation **Father's Details** Name • Preman Chauhan Date Of • 01-01-1970 Anniversary Mobile No. B.SC BCA MCA • 80000-120000 Annual Income Email • 01-01-1970 ADV Profession Education Yes Alive Date of Birth Office Address Organization Name Designation

Medical Details

 On Date: Blood Group: HB: BP: Height: Weight: Phy. Handicapped Percent: Description: 	 19-11-2019 A+ 14 100 40 Yes 70 The ADA defines a person with a 	 Dental: Allergy: Description: Vaccine: ID Mark1: ID Mark2: Complexion: Vision: Narration: 	 No Brun •
 On Date: Blood Group: HB: BP: Height: Weight: Phy. Handicapped Percent: Description: 	 20-11-2019 A+ 14 100 40 NO 	 Dental: Allergy: Description: Vaccine: ID Mark1: ID Mark2: Complexion: Vision: Narration: 	 e 2e No ewr we 2we2 dewe wq2w 2e Brun cdewr qe3 2e3w ee3e3w2
 On Date: Blood Group: HB: BP: Height: Weight: Phy. Handicapped Percent: Description: 	 20-11-2019 14 100 40 NO 	 Dental: Allergy: Description: Vaccine: ID Mark1: ID Mark2: Complexion: Vision: Narration: 	• No • Brun •

• On Date : • 20-11-2019

• Blood Group : • 14

• HB: • 100

• BP: • **40**

• Height : • NO

• Weight: •

• Phy. Handicapped

• Percent:

• Description :

• Dental :

• No

Allergy :

• Brun

• Description :

• Vaccine:

• ID Mark1:

• ID Mark2:

• Complexion :

• Vision :

• Narration :



Medical Details

On Date :	•	• Dental :	•
Blood Group :	•	Allergy:	•
• HB:	•	• Description :	•
• BP:	•	• Vaccine :	•
• Height :	•	• ID Mark1 :	•
• Weight:	•	• ID Mark2 :	•
Phy. Handicapped	•	• Complexion :	•
• Percent :	•	• Vision :	•
• Description :	•	Narration :	•

Sibling Details

• Registration No :- DIL2342

• Class:- First

• Name :-Dilip Kumar

• Section :-Section A

• Registration No :- ESGE1001

• Class:- Fourth

• Name :-HARISHANKER

• Section :-Section A

Subject Details

Subject Name	ISOptional
Biology	Compulsory
Chemistry	Compulsory
Mathematics	Compulsory

Document Details

DOCUMENT NAME