Enrollment Form



Admission Number (reference): 64645

| Student Details | | |
|-----------------|------------------------|--|
| Student Name | srini2351994@gmail.com | |
| Roll Number * | 55435 | |
| Class | 2 | |
| Date Of Birth | 18-07-2012 | |
| Gender | Male | |
| Blood Group | B+ | |
| Category | | |

| | Contact Details | |
|------------------------|-----------------|---|
| Correspondence Address | | |
| | | |
| City | | |
| State | | |
| Pincode | | |
| Phone | | |
| Mobile | | 0 |
| Email | | |

| Login Details | | |
|-----------------------|------------|--|
| Roll Number * | 55435 | |
| Temporary Password ** | db9fa7043d | |

Student's Signature Parent's Signature

Admin's Signature

^{*} Roll Number may be Temporary , ** Please Change the Password for Security Reasons This is a Computer Generated Form. If any Discrepancy Contact Admin : eduCloud Reference Number 7