Session 2026-27 <u>APPLICATION FORM</u>

1. Student Name :	
2. Date of Birth :	
3. Class (Applied for):	l latest passport
4. Father's Name :	size photograph
Mobile No.:	
Email ID :	
5. Mother's Name :	
Mobile No.:	
Email ID:	
6. Correspondence Address :	
7. Permanent Address:	
8. Sibling if any (Name and Class) :	
9. Name and Address of the Last School Attended:	
 10. Copy of the (Annual/Half yearly) Marksheet attached: Yes/N 11. Copy of the Students ID card of the previous school attached: Yes 12. Special Achievements of the child: (Sports/Cocurricular Activities) 	/No
<u>Declaration</u>	
I,, the father/mother of	, hereby affirm
that the information provided above is accurate. Should any of the inf	ormation be determined to be false, the
candidature of my ward will be revoked, and no refund will be issued	to me.
Signature:	Date:
Attachment(s): 1. DOB Certificate 2. Marksheet(s) 3. PEN/APAAR ID 4. Aadhaar Card (Mother, Father and Child)	
For Office Use only	
Application Form No	
Class Applied For	