(PLEASE FILL THE FORM IN CAPITAL LETTERS ONLY)

Name	:			
Father's Name	:			
Admission No.	:			
Valid up to	:			
Date of Birth	:			
Blood Group	:			
Permanent Home	:			
Address				
Local Address	:	·		
			Photograph	
E-mail address	:		Paste Here	
Student's Contact	No. :			
Parents' Contact N	To. :			
Aadhar No.	:			
Sign. Issuing Aut	hority	<u> </u>	Sign. of the Students	