LOKSEWA SHIKSHAN BAHUUDDESHIYA MANDAL

NUTAN ENGLISH SCHOOL

Buldhana Road, Malkapur, Dist. Buldhana

Cont. 9307774894, Mob. 9890145890, 9422733334

APPLICATION / ADMISSION FORM

Please affix a recent colour photograph of the child.

Academic Session : 20 - 20

(To be filled in Capital Letters only)

For Admission to Class : ☐

1. Full Name of Child : _____
2. Date of Birth : Date ☐☐ Month ☐☐ Year ☐☐☐☐
3. In Words : _____
4. Sex : Male ☐ Female ☐ Aadhar No. : _____
   Nationality _____ Mother Tongue _____
5. Place of Birth : _____
6. Religion : _____ Caste _____
7. Name of the Previous School & Std. (If attended) : _____
8. Prevous School UDISE Code : _____
9. Name of the Brother and Sister : _____
10. School & Class : _____
11. Father's Full Name : _____
12. Address : _____
    Whatsapp No._____ Mob. No. _____
13. Occupation : _____ Qualification : _____ Annual Income : _____
14. Mother's Name : _____ Mo. _____
15. Mother's Occupation : _____ Qualification _____
15. Name & Address : _____
    of local guardian (if any) _____

Declaration

I/ We Solemnly declare that all information provided in application is True & Correct and any information either part/ full found to be false/ incorrect will be responsible for action as rules of institution & all the consequence thereafter regarding educational loss of my ward will be my responsibility. I/ We have read the prospectus carefully and I/ We agree to fully abide by rules /m regulations in terms of Dress code. Attendance, payment of fees, Discipline etc.

Your Faithfully,

_____

Malkapur

Date : / /20

Name : _____

Father / Mother / Guardian

Note : 1) Attach original Birth Certificate with xerox 2) Stamp Size 2 Colour Photos
3) School leaving Certificate Std. Second onward 4) Cast Certificate (First Onward)

For Office Use

Reg. No._____

Class : _____

Admission Date : _____

Principal Sign. _____