



ADMISSION FORM

(Academic Session 2024-2025)

Affix
Passport
Photo
here

For Class –VI

1. Name of applicant
2. Date of Birth :
3. Father's Name:.....
4. Occupation:.....
5. Mother's Name:.....
6. Occupation:.....
7. Permanent address:
Town / Village / Locality :
- District : Telephone No :
8. Name of Local Guardian and Telephone No.....
9. Religion :Sect/Denomination:.....
10. Last Examination result : Class :.....
Total Marks out of
- Division : Percentage :
11. Reservation category:.....
12. Whether physically Challenged, if yes (Certificate to be enclosed):.....
13. Aadhaar No... ..
14. Permanent Education Number (PEN) of student
15. Any history of Chronic illness/Allergy.
If yes, please specify :
(a) On going treatment :
- (b) Medication :.....
- (c) Others :.....

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Undertaking by applicant: The information given in the application is true to the best of my knowledge.

Date:..... Signature of applicant ()

Note :List Documents to be enclosed (Duly attested documents by Gazetted officer/ Local Governing Body/Village Council /Local Council):-

- (i) Marksheet of class-V.
- (ii) Voter ID card of parent(s).
- (iii) Aadhaar Card of applicant.
- (iv) ST Certificate of applicant and his/her parent(s).
- (v) Applicant's birth certificate.
- (vi) Medical fitness certificate.

Approved by :

(Name & Signature)