

KAMAL MODEL SR. SEC. SCHOOL

(Recognised & Affiliated to CBSE) K-1, Ext., Mohan Garden, New Delhi - 110059 Ph.: 8929000851-54

SESSI	20	
CLCI	711	

						SI	ESSION 2	0	
		Paste the Photo of the student		e the Photo ne Mother		Paste the Photo of the Father			
Admn. No	No. Registration in Class								
Name of to	the student I letters)								
Sex	Male		Fen	nale					
Nationali	ty			Aadhar Card	No.				
Date of Birth in Figures Page 1997									
Date of Birth in Words									
Age as on	31.03	Day N	Month	Year					
Blood Group of the Student									
The Category to which student belongs. (Please attach relevant certificate)									
Full Residential Address with contact no									
Permanent Address with contact no									
Last School	ol Attended								
Any Siblings in this school, if yes name & class									
Distance 1	from school								

Details of Mother and Father:

Detai	ls	Mot	ther	Father		
Name						
Aadha	r Card No.					
E-mai	I					
Natio	nality					
Educat	tional Qualification					
Occup	pation					
Annu	al Income					
	e of office and ddress					
Conta	ict No.					
	Signature of Mother			Signature of Father		
	Date:			Signature of Principal		