



The Noble Scholar Academy



KALIYAN, SRI GANGANAGR

ADMISSION FORM

Scholar noClass.....Add.Date...../...../..... R.T.E.S.No.....

Student Name :Sex (M/F).....

Father's Name:.....

Occupation :Contact No.:.....

Mother's Name :

Occupation :Contact No.:.....

Post. Address :

.....

.....Parents Email :

Guardian Name :Rel.with student:.....Contact No.:.....

Date of birth :/...../.....(In words)

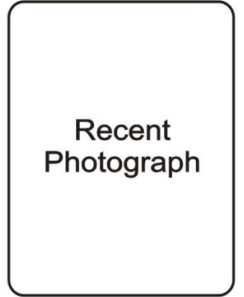
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Religion :Caste :Category :APL/BPL:.....

Name of Br./Sis.Studying in school with class :

Previous att. School:.....

Period of living in Rajasthan :



Att.Doc.: Birth Caste Income APL/BPL T.C Physical Other

Declaration by parents /Guardian

1. I.....Pledge to declare that the above mentioned information are true to best of my knowledge and any false information will be my responsibility.
2. I declare that I along with my wardwill be abide by all the rules and regulation of school. In case of violation decision of school administration will prevail.

Parents/Guardian Sign.

Admission granted/not granted

Principal / Director