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APPLICATION FORM

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School Name & Add. ______________________________

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School Code. | | | | | | | | | | | | | Seat No. | | | | | | | | | | | | | | |

Marks | | | | Scholar Student Yes 1 No 2 | | Cheque No. | | |

1. Name

2. Age Sex : Male Female Date of Birth | | | | | 1 | 9 | | |

3. Address

Tq. /Thasil

Dist State Pin

4. Mobile No. Other Mobile No.

5. Phone No. e-mail

Educational Qualification

Name of Examination	S.S.C./C.B.S.E. Board	Year of Passing	% of Marks	Result (Pass/Fail)

13. Payment details : Bank

Branch Amount

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Signature Student's

Signature Parent / Guardian's

Signature Head Master & Stamp