## Shri Ram Vidya Mandir

## Affiliated To CBSE, Delhi

Shyampur Kangri, Haridwar

Affiliation Number- 3530102, School Code- 81134 .in

Passport size Photograph of the Student with Mother/Father Jointly

01606	Phone No. 8057917638, Email- office@srvm.edu.
	Website: www.shriramvidyamandir.com
Sr. No	ADMISSION FORM

Class in which admission is sought fo	r:	Session
1. (a) Name of the child in full (in capita	al letters):	
(b) Sex: Male	Female	
		Walter Francisco
2. Date of Birth:	Month	Year suppose without at
In words		
Age of the student as on 31st Man	ch: Year Mont	h Day
ed bituada villadaria ian izano ao as	eenii kasm tertoto zatedab va	site cites + Helory of settems, epilepi
4. Do you belong to gen./SC/S' Gen. Cat. SC	T/OBC/EWS/Disabled/S.G.Child? ST OBC	attach cetificate.  EWS Disabled SG Child
day is an analysis		
5. Details of parents:-	y so ever in total legality do on mado cole i contro he blu	diversite during the scripp and engine dispersion of the scripp of the s
Details of Mother/Father/ Guardian	Mother with Aadhar Card No.	Father with Aadhar Card No.
(i) Name (in capital letters)	Signature of Parents/G Signature of the Parents/G	Acquisition
(ii) Nationality & Occupation	LARATION BY THE PA	16. Please arren the following
(iii) Name of office & full address with Telephone No.	apove information furnish not see Nem Martidge (Corporation	tead Sills to the state of the sent
(iv) Full residential address with tele. No.	and the following being a true o	Asteriar Cardinolar Id Card) P
(v) Permanent Address	trebute to a	5 Five Passport Sta Photograp
(vi) Annual Income in (Rs.)	als (Tilakanan Pramaan Patra	ACCEPTAGE OF A COORDINATION CONTROL  7. Stage 18's Vaccination Continu

6. Name & Address of local guardia	an (if any):	2 2
7. Name & Address of the School la	ast attended with class:	
8. Whether last school was CBSE	affiliated:	
9. If, the last school was not affiliate	ed with CBSE, specify the name of	of the Board
10. (a) Result of last examination:	(b) (b) (b)	Percentage
11. Subjects proposed to offer:	MAN TO MOUSE MAN TO A	2
	3	4
	5	6
12. Whether the transfer certificate	e is attached YES/No.:	Secretary (d)
Design of Assessed of the 1857		Date of T.C.
13. Mother tongue:	Home tow	n Millioning
and a transfer of the second s	Tupan For	
14. Health and Physique	Shot I say Das Pasa no	
Is there any evidence of learning	ng disability (attach full explanation	on) Yes/NoAny
allergies, History of asthma, epileps	sy, diabetes or other major illnes	s or physical disability should be
noted here and details to be submi	tted.	Con: Chi
I have not hidden any medical	problem in respect of my ward. I	n case of any injury sustained by
my ward during the school authority	y so ever in total legality.	
		au mani o shantinhi ta shata 1
Date/ImpOrerbsAdiwaedts?	Name of the Parents/Guar	rdian
	Oi	(i) Name (in capital letting)
Place	Signature of the Parents/G	uardian
15. Please attach the following		(ii) Nationality & Occupation
Duly attested Copy of the Rep	ort Card of the school last atten	
and date of birth of pupil.		thin is a some or a man (w)
2. Duly attested Copy of birth certifi	cate from Municipal Corporation.	
3. Aadhar card of the student.		
4. Aadhar Card/voter ld Card/ P	resent Address Proof of Parents	s/guardian.
5. Rashan Card of Parents.		
5. Five Passport Size Photograp	hs of student.	(v) Permanent Address
6. Caste Certificate: OBC/SC/S		
7. Student's Vaccination Certific	ate. (Tikakaran Pramaan Patra	) (873) III SALUSSA IBUINA (IV)

- 1. All Documents should be self attested before submitting the application form.
- 2. Admission form will be summarily rejected if the above mentioned documents are not enclosed in the prescribed manner.

I Solomply declare that above particulars at a	
I Solemnly declare that above particulars abo	Speaker:
correct. I also agree to abide by the rules and regul	ations of the school as will be in force from time
to time.	Admittan in close
Date	Place
Annual Fee Ps	
Name of the Parents/Guardian	Signature of the Parents/Guardian
Transport requirement	
I need the school transport from	. I will follow the rules
and regulation of the school transport. In case	the schools transport fails to report at my
Pickup Point, I will drop my child at school and o	claim no charges for it.
Detells of Archer/Falher/ Anglison with Aspire	arCardNo. Father with eacher Care No.
Date Signatur	re of Parents/Guardian
houseness 2 mans of the environment	and allow agree to a control of the calcol of the control of the calcol
A serie months a victoria and to be series and to	
DECLARATION BY	THE PARENTS
I hereby declare that the above informat	tion furnished by me is correct to the best
of my knowledge & belief.	
I shall abide by the rules of the School.	
Pennanunt Aduless	
Date:	Siganture of parents

## FOR THE OFFICE ONLY

1.	Certified that I have checked the application form and the relevant papers are found in order.		
2.	Please admit to classSection	after checkin	Admission Incharge
918 918	Date:  The proposed by offer and the propose	PRINCIPAL	Setsylninators : \
12	Admitted to classSection  Datedissued.	Fee Receipt No	
	Details of amount received:	Annual Fee F Tution Fee F Computer Fee F Bus Fee F	रेड रेड रेड रेड
	ergies. History of netronal epilopsy, distrates or of	TOTAL	<b>₹s</b>
	presidential Native principal consister	modiale de ses so	idos erá celas
	Name has been entered in the class Attendance For Certified that all the entries have been made in the school's For Registration No. of the student in Admission Withdrawal Register	Register and the dues have been	
Date	e:		Office Suptd.
Adm	ission considered by the school is in accordance with the prov	isions of the Board & approved.	
Date	e: Duly anested copy drops Haustrustrustrustrus et ele ele ele ele ele ele ele ele ele	Sign. of F	Principal/ Official Seal
	Luly attacked Copy of path oxfuncate from Altered; Addher card of the student		eobeladna vardo