

STUDENT INFORMATION FORM

Student's Name (as on Aadhaar Card) _____

Date of Birth (DD/MM/YYYY) ___ / ___ / _____ Gender (M/F) _____

Adm. No. _____ Date of Adm. ___ / ___ / _____ Class of Adm. _____

Aadhaar Number (if any) _ _ _ _ _ _ _ _ _ _

Student's age as on 31-Mar-2018 ___ Years ___ Months ___ Days

Photo
of
Student**PLACE OF BIRTH**

Address _____ State _____

City/Village/Town _____ District _____

Sub-district/Tehsil _____ PIN _____

CURRENT ADDRESS

Address _____ State _____

City/Village/Town _____ District _____

Sub-district/Tehsil _____ PIN _____

Distance of Current Residential Address from school (in Kms): _____

CONTACT DETAILS

Residential Landline number (with STD Code) 0_____

Father's Contact Number _____ Email _____

Mother's Contact Number _____ Email _____

Other's Contact Number _____ Email _____

DETAILS OF FATHER

Father's Full Name (as on Aadhaar Card) _____

Father's Aadhaar Number _____

Father's Occupation _____

Father's Qualification _____

Father's PAN Card Number _____

Is Income Tax Payer? (Yes / No) _____

Photo
of
Father

STUDENT INFORMATION FORM

DETAILS OF MOTHER		Photo of Mother
Mother's Full Name (as on Aadhaar Card)	_____	
Mother's Aadhaar Number	_____	
Mother's Occupation	_____	
Mother's Qualification	_____	
Mother's PAN Card Number	_____	
Is Income Tax Payer? (Yes / No)	_____	
SIBLING DETAILS		
(1) Name of Brother/ Sister	_____	Class _____
(2) Name of Brother/ Sister	_____	Class _____
MISC. DETAILS		
Annual Income of Family (Parent's together OR Guardian's) (in Rs.) _____		
Does the student belong to Below Poverty Line family? (Yes / No) _____		
Religion _____ Category (General / SC / ST / OBC) _____		
Is there any disability? (Yes/No) _____ Any Genetic Disorder? (Yes/No) _____		
Blood Group _____ Hobbies _____		
Student's Past Achievements (Sports/Scholarships) _____		
CHECKLIST OF DOCUMENTS SUBMITTED		
(1) Photocopy Birth Certificate (attested)	(Yes / No)	_____
(2) 4-Photos of Student (Passport Size Coloured)	(Yes / No)	_____
(3) Original Transfer Certificate from Previous School (if applicable)	(Yes / No)	_____
Name of Previous School _____		
Address _____ Affiliation No. _____		
(4) Photocopy of Report Card of Previous School (attested)	(Yes / No)	_____
(5) Medical Fitness Certificate / Vaccination Record	(Yes / No)	_____
(6) Photocopy of Aadhaar Card (attested)	(Yes / No)	_____

Signature of Father _____

Signature of Mother _____

FOR OFFICE USE ONLY	
(1) Route No. ____ Stop Name _____	Route I/C Sign _____
(2) Class/ Sec _____	Class Teacher Sign _____
PRINCIPAL	