MAHARISHI VIDYA MANDIR

		ADMISSION FORM	Affix Passport size
No.	CA	Date	Photograph
Cla	ss in which admiss	sion sought	
1.	Full Name of the S	Student	
2.	Date of Birth	3. Male	Female
4.	Religion	Cast (ST/SC) Nationality	
5.	Last School attend		
6.	Transfer Certificat	ansfer Certificate No Dated Standard	
7.	Is any of student's brother or sister already studying in this school ? Yes / No If yes, give Name		
	Male/	Female ClassSe	ection
8.		ents / Guardian (Please tick (4) v	
		 er	
		palification of Parents/Guardian:	
	,	Mother Guardian	
	d) Occupation: Go	ovt. Service: Central State Public Sector Any other	Private Sector
	Designation/Positi	ion	
		me of Parents/Guardian in Rs.	
	Residential Addre	ss	
	Office Address Tel		
	Address for correspondence		
	Tel		
	I certify that the date of birth and other particulars entered above are correct.		
	I solemnly declare that I shall abide by all the rules and regulations of the school.		
		Full Signature of	Parents/Guardian
	photocopy of bi icate, should be	th in this admission form cannot be altered later. In this admission form cannot be altered later. In this certificate from competent authority along with a produced. Original birth certificate would be returned.	th the original birth certifurned after verification.
		FOR OFFICE USE ONLY	
Reg	istration No	Receipt No Date	Amount
		SectionAdmission	
Reg	istration No	Date	
		as registration fee for	
		You are reque	
	interview on		
		Authorised Signatory	