



Panisheola Indira Smriti Vidyapith

No.PISV/23-24/

(Senior Secondary)

Affiliated by the Central Board of Secondary Education

ESTABLISHED-1985 School No. - 15687

AFFLN. NO.-2430022/94,

Tel:(03212) 242-639



Mob. : 9434042104

(03212) 242-644

www.pisv.in

9051532497

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APPLICATION FORM FOR ADMISSION

- 1A. Name of the Student (In Block Letters) :
- B. Candidate's Aadhaar No.: Date of Birth:

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
- C. Mobile No. (Aadhaar linked) : Email ID. Blood Group
- D. Caste :..... GEN SC ST OBC MINORITIES (Attach Certificate issued in favour of candidate only)
- E. Only Child: Y N Gender: M F Whether Differently Aabled:(PWD) YES (Certificate to be enclose) NO
- 2A. Mother's Name (In Block Letters) : Annual Income :
- B. Occupation : Mobile No. :
- 3A. Father's Name (In Block Letters) : Annual Income :
- B. Occupation : Mobile No. : Email ID.
- C. Address :
..... Dist : PIN : Locality : RURAL URBAN
4. Enclosure : 1. Birth Certificate 2. Aadhaar card 3. Caste 4. Transfer certificate 5. Pass certificate

Guardian's Declaration:

I/we solemnly declare that the particulars about

Master/ Miss

are true and correct

.....
Signature of the Father/Mother/Guardian

Date.....

In Case of first admission:

I believe that the particulars given by

.....

.....

.....
Signature of a respectable person known to Principal

Date.....

Declaration- we Declare that our candidate will avail school Bus facilities where provided by the school authorities. We also declare that we & our candidate will abide by all rules & regulations of this school. We must be paid school fees & Bus fare within 10th day of every month as per norms laid down by the school authorities.

.....
Candidate's Signature

.....
Father/Mother/Guardian's Signature

.....
Office Copy

Admission Form No..... Date..... Form Amount.....

Signature with Seal For Office Staff.....