



SWAMI VIVEKANANDA ACADEMYSM

CBSE AFFILIATION No. 1030385, ISO 9001 : 2008

'ABHILASHA BHAVAN' ROOPJYOTI PURAM, MEHROTRA FARM,
BHIND ROAD, GWALIOR (M.P.)- 474005
PHONE : 0751 - 4041142 / 45

Affix
Passport Size
Photograph

APPLICATION FOR ADMISSION

S. No. **01680**

ADMISSION NO. _____

DATE OF ADMISSION _____

1. Admission For Which Class _____
2. Full Name of the child : Master/Miss _____
4. Address : _____

5. Date of Birth : (Date) _____ (Month) _____ (Year) _____
6. Age as on _____ Years _____ Month (Xerox copy of birth certificate to be enclosed)
7. Name of the school (Studied to far) _____
8. Class in which studied : _____ Medium of instruction _____
9. Percentage secured : _____ Mother Tongue : _____
10. Transfer Certificate : Attached / Not Attached
11. No. & Date of Transfer Certificate _____
12. Particulars of brothers / sister of the child studying in this school (indicate Admission no & class / section)

13. Father's Name _____ Academic Qualifications _____
14. Annual Income _____ Designation _____
15. Office Address : _____
16. Mother's Name _____ Academic Qualifications _____
17. Annual Income _____ Designation _____
18. Office Address : _____
19. Residence Address _____
20. Telephone No. Residence _____ Office _____
21. Whether Transport required _____
22. In case of SC/ST/OBC _____ (Please Attach Certificate)

DECLARATION

I certify that I am the father/mother of the child and the information furnished above is correct to the best of my knowledge and I have filled carefully the information given overleaf.