PASSPORT

SIZE PHOTO

1. Name of the Student

5. Address with Pincode

2. Date of Birth

4. Father's Name

3. Gender

SRI VIJAY VIDYASHRAM

Discipline, Courage, Excellence

Pananthoppu, Periyagram, Tirupattur - 635651 Ph : 7639665599, Mail : vijayvidyashramcbsetpt@gmail.com

REGISTRATION FORM		
1. Name of the Student		
2. EMIS Number		
3. Date of Birth		
4. Gender		
5. Student Aadhar ID No.		
6. Religion, Caste & Community / Sub C	Caste	
7. Class for Which Admission is Needed		
8.Mention Whether OC/BC/MBC/SC/ST (Attach a copy of certificate except for OC)		
9.Name of Parent	Mr.	
	Mrs.	
Farent's Educational Qualification	ither	
Mo	other	
11. Parent's Occupation	ither	
	other	
	ither	
12. Parent's Income	other	
13. Mobile / Phone No.		
14. Residential Address		
PARENT'S COPY		

15. Special interest in	
16.Conveyance Required (If Yes, mention the stopping)	Yes
17.Accommodation	Yes
18.Email ID	
19. a) Name of the School where candidate is b) Whether recognized: Yes No d) Board of Affiliation: CBSE STA 20 Siblings Studying in this school Name 21. Identification Mark 2).	c) Medium of Instruction : English Any Other MATRIC
Certified that the information	ATION BY PARENT / STUDENT I given above is true to the best of my knowledge and belief. I shove is found incorrect, I will abide by the decision of the
Signature of Father / Guardian	Signature of the Student FOR OFFICE USE ONLY ORDER
Admitto Class	section
Date	
Note: Fees once paid will not be refunded on any accou	Signature of the Principal