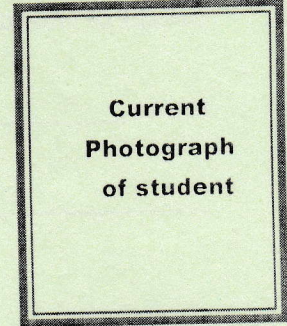
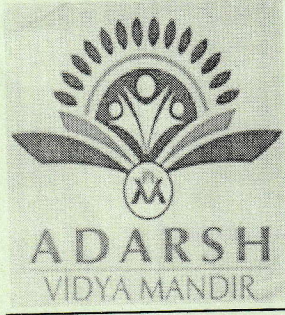


ADARSH VIDYA MANDIR

MEHAM ROAD , BHIWANI (HARYANA)

(Affiliated to CBSE vide Code 531530)

Ph : 9138155655 | Mail ID : avm.bhiwani@gmail.com



ADMISSION FORM

Admission No : _____

Date : _____

1. Admission Required in Class _____.
2. Name of Student as per SLC/ Aadhar Card (In Capital Letters) _____
3. Date Of Birth as per SLC/ Birth Certificate _____
4. Aadhar Number of Student _____ SRN if available _____
5. Permanent Home Address _____
6. Enrolment Number of Haryana Education Board/ CBSE (For 9th & above class) _____
7. Nationality : Indian , Religion : Hindu/ Muslim Caste _____
Category : (Gen/SC/BCA/BCB/Any other _____).

8.

| Details of Parents | Father | Mother |
|------------------------------|--------|--------|
| (a) Name | | |
| (b) Education Qualification | | |
| (c) Occupation | | |
| (d) Yearly Income | | |
| (e) Whether Tax Payee or Not | | |
| (f) Contact No. | | |
| (g) Email ID if any | | |

9. Subjects Opted :-

- (a) _____ (b) _____ (c) _____
(d) _____ (e) _____ (f) _____

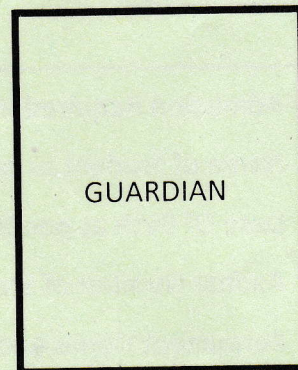
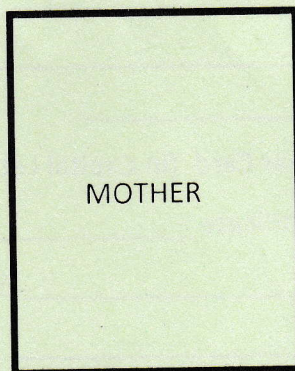
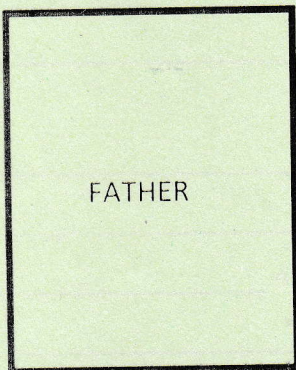
10. Details of Sibling (Brother/Sister) :-

Name _____ Studying in class _____ (Only in this school).

11. Details of Guardian :-

Name _____ Contact No _____ Address _____

Please affix photographs of Parents and Guardian:-



Documents Required :-

1. Photo copy of birth certificate.
2. Photo copy of Aadhar Card (Student, Mother & Father)
3. SLC in original (on line).
4. Report card of class passed.

Date :

(Parents Signature)

(Signature)
I/C Admission

(Principal)