

School Admission Application Form (Demo)

Please fill in the details below.

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|------------------------|--|
| Student Name: | |
| Date of Birth: | |
| Gender: | |
| Class Applying For: | |
| Previous School: | |
| Father's Name: | |
| Mother's Name: | |
| Parent Contact Number: | |
| Email Address: | |
| Home Address: | |

Declaration:

I hereby declare that the information provided above is true and correct to the best of my knowledge.

| | |
|----------------------------|--|
| Parent/Guardian Signature: | |
| Date: | |