



JEEWAN JYOTI CHANDRA KAMAL ACADEMY

REGISTRATION NO. _____

New Patel Nagar, Kalpi Road, Orai UP, India (285001)

Affiliation No 2987/79

For Admission in the School for the Academic Session _____

Admission to Class:

SR No.

(PLEASE GIVE FULL DETAILS AND WRITE DISTINCTLY IN BLOCK LETTERS)

Name of the Student

Date of Birth (in digit) Place of Birth _____

Date of Birth (in words) _____

Caste GEN OBC SC/ST OTHERS Gender M F Nationality _____

PARENT'S DETAILS

Father's Name _____

Father's Age _____ Father's Occupation _____ Mobile No _____

Mother's Name _____

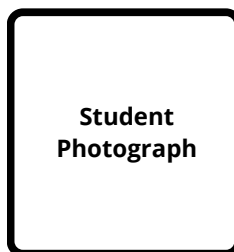
Mother's Age _____ Mother's Occupation _____ Mobile No _____

Home Address _____

Whatsapp Number _____ Brother/Sister in this School Yes No

Name of the last Institution _____

PHOTOGRAPH OF PARENTS & GUARDIAN



DECLARATION FORM

I, _____ do hereby solemnly affirm and declare as follows:

That I am the Father/ Mother of _____ (Name of Child) who is seeking admission in your school. He/ She was born on ___/___/___ (DD/MM/YY) according to Transfer Certificate (TC) or Birth Certificate (BC).

I confirm that the information provided above is true and correct to the best of my knowledge. I also confirm that if at any stage, this information submitted by me is found to be false/ invalid; the admission of my child would be cancelled. No refund policy on any fee structure, If your child found in any suspicious activity, JJCKA will terminate your child.

House Red Blue Yellow Green

In-charge Sign

Parent's Sign