

Name in English:

Sex : ☐ F ☐ M Blood Group:

Class : Identification Mark :

Religion : | | | | | Caste : | | | | |

Residential Address :

[illegible]

Mother's Name | | | | | | | | | | | | | | | | | | | | | |

[illegible]

Mother's Occupation _____

[illegible][illegible]

Telephone Number : **Mobile:**

E-mail ID

[illegible]

Ration Card No : APL BPL

I confirm that all the information on this form is correct and that I have parental responsibility for the child named in "student details". I understand that the authority reserves the right to verify the information I have supplied and that any offer of a place based on fraudulent information may be withdrawn.

[illegible]

Parent's Signature

Date

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[illegible]

Year of joining:

Principal's Signature



GAMA INTERNATIONAL SCHOOL
AYITHARA MAMBARAM P.O. KUTHUPARAMBA, KANNUR, KERALA