

MAHATMA GANDHI GOVERNMENT SCHOOL (ENGLISH MEDIUM), MANSAROVAR, JAIPUR

Kaveri Path, Mansarovar





Form Number :	ON/2022-23/1223		
Section -A			
Name :	RAJ CHOUDHARY		
Gender:	Boy	Category:	OBC
Religion:	Hinduism	Date of Birth :(YYYY-MM-DD)	2012-12-25
Email Id:	h.choudhary@sbi.co.in	Contact No.:	9694290117,9978715056
Aadhar Number :	985223144356	Desired Class :	5th
Third Language :		Home Distance :(KM)	2 Km
Present Address :	Plot No 74 Shaktinagar, Gajsinghpura Jaipur		
Permanent Address :	Vill Akhaipura post Gangati Teh Moazamabad Dist Jaipur Raj 303009		
Single Girl Child:	No	Siblings Name & Class:	&
Student's Bank Account Details :			
Name of Bank:	State Bank of India	Name of Branch:	Moazamabad
Account Number :	39940504034	IFSC Code :	SBIN0031737
Child with special needs (CWSN):	No	Disability:	
Co-curricular Activities :	NONE	Sport Certificates :	
Blood Group:	A+	Weight (kg):	45
Height (cm):	150	Hobby:	Sports
Section -B			
Father Name :	JAGDISH PRASAD JAT	Mother Name :	Rampyari Devi
Father Qualification :	8th	Mother Qualification :	
Father Aadhar No. :	315213178078	Mother Aadhar No. :	
Father Occupation :	Agriculture	Mother Occupation :	
Father Income (Monthly):	15000	Mother Income (Monthly):	
Section -C			
Details of Last School Attended :-			
Name of School : Surendra Public Sr Sec School			
Type of School :	Private	UDISC Code :Only for Govt. School	
SR Number :		Last Class Attended :	4th
Last Class Result :	Studying	T.C. Number:	
I hereby declare that the above information furnished by me is correct to the best of my knowledge. I shall be abided by the rules of school also. The date and other particulars furnished by me in respect to my ward RAJ CHOUDHARY are correct. Note:- 1. Submission of hard copy is mandatory after filling form, only then your ward form will be consider for lottery process. 2. One photograph of child is mandatory.			
Date - 11-May-2022 Signature of Guardian			
FOR OFFICE USE ONLY			
- CERTIFIED THAT I HAVE CHECKED THE APPLICATION FORM AND RELEVANT DOCUMENTS ARE FOUND CORRECT ALLOTTED NEW S.R. NO			
	Sign	Sign	Sign
DATE	ADMISSION INCHARGE	CLASS TEACHER	PRINCIPAL