



**MAHATMA GANDHI GOVERNMENT SCHOOL (ENGLISH MEDIUM), MANSAROVAR, JAIPUR**  
Kaveri Path, Mansarovar  
**ADMISSION APPLICATION FORM SESSION 2022-2023**

Form Number : **ON/2022-23/1443**

**Section -A**

Name :	MAYANK SANKHLA		
Gender :	Boy	Category :	SC
Religion :	Hinduism	Date of Birth :(YYYY-MM-DD)	2017-05-04
Email Id:	shankhlarakesh826@gmail.com	Contact No. :	8432837634
Aadhar Number :	583428644314	Desired Class :	UKG
Third Language :		Home Distance :(KM)	
Present Address :	63A, ABHISHEK VIHAR, GANDHI PATH WEST, JAIPUR-302034		
Permanent Address :			
Single Girl Child :	No	Siblings Name & Class :	&

**Student's Bank Account Details :**

Name of Bank :		Name of Branch :	
Account Number :		IFSC Code :	
Child with special needs (CWSN):	No	Disability :	
Co-curricular Activities :		Sport Certificates :	
Blood Group :		Weight (kg):	
Height (cm):		Hobby :	


**Section -B**

Father Name :	RAKESH SANKHLA	Mother Name :	LALITA SANKHLA
Father Qualification :		Mother Qualification :	
Father Aadhar No. :	807131843006	Mother Aadhar No. :	417445881271
Father Occupation :		Mother Occupation :	
Father Income (Monthly) :	8000	Mother Income (Monthly) :	

**Section -C**

**Details of Last School Attended :-**

Name of School :			
Type of School :		UDISC Code : Only for Govt. School	
SR Number :		Last Class Attended :	
Last Class Result :		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 **MAYANK SANKHLA** 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.....

DATE	Sign ADMISSION INCHARGE	Sign CLASS TEACHER	Sign PRINCIPAL
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