AFFILIATION NO. 331095 | SCHOOL CODE 66854

GYANALOK PUBLIC SCHOOL

Affiliated to C.B.S.E., New Delhi

SH-54 Piprahi Road, Kothiya Chowk, Sheohar, Bihar 843329

Phone: 7011846457, 9288105005 | Email: info1gyanalok@gmail.com

ADMISSION ENQUIRY FORM

1. STUDENT'S PERSONAL DETAILS

Student's Full Name				**AFFIX RECENT PASSPORT-SIZE PHOTOGRAPH** *(Self-Attested)*
Gender	☐ Male ☐ Female ☐ Other	**Date of Birth**		
Category	☐ General ☐ OBC ☐ SC ☐ ST	**Aadhaar No.**		
Blood Group		**Nationality / Religion**		
Class Applying For		**Mother Tongue**		

2. PARENT / GUARDIAN DETAILS

Father's Name		**Mobile No.**	
Mother's Name		**Mobile No.**	
Guardian's Name		**Mobile No.**	
Parent's Email			

3. ADDRESS DETAILS

Residential Address	

4. ACADEMIC BACKGROUND (PREVIOUS SCHOOL)

Previous School Name		**Previous Class Passed**	
Board Name		**Marks / Percentage**	

5. EMERGENCY CONTACT DETAILS

Emergency Contact Person		**Emergency Phone**	
Relation to Student		**Alternate Phone**	

Declaration: I hereby declare that the information provided above is true and correct to the best of my knowledge. I understand that any false information may lead to cancellation of admission.

Parent / Guardian Signature **Authorised Signature (School)**

For Office Use Only: Enquiry No. _____ Date Received: _____ Received By: _____