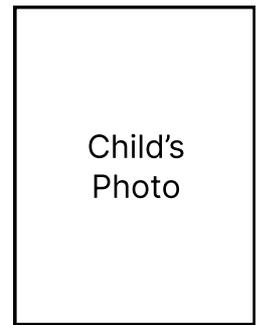


STUDENT APPLICATION FORM



Child's name _____

Mother's name _____

Father's name _____

Child's date of birth DD MM YYYY

Child's blood group _____ Girl Boy

Child's allergies (if any) _____

Child's special needs (if any) _____

Child's likes/interests _____

Child's dislikes _____

Child's Aadhaar number

Mother's Aadhaar number

Father's Aadhaar number

Residential address _____

Applying for program Playgroup Nursery KG

Do you want daycare? No Yes Till what time? [Till 5 PM]

Father's signature & phone number

Mother's signature & phone number



Date of Application