



OFFICE OF THE PRINCIPAL

IBEMHAL VISHAL ACADEMY SAPAM, KHONGJOM

(Govt. Recognised)

A Division of BK GROUPS

APPLICATION FOR ADMISSION FORM (2023-2024)

Latest
Passport
Size
Photo

Sl.No.....

Admission to Class:

STUDENT DETAILS:

Name (Capital Letters): _____

Date of Birth (Figures):

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 Gender: Male Female

Nationality: _____ Blood Group: _____

Address: _____

Previous Institute Attended: _____

Parents Mobile No.: _____

Aadhar Card No.

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Religion: _____ Caste: _____

Nationality: _____ Blood Group: _____

PARENTS DETAILS:

Father's Name(Capital Letters): _____

Education: _____ Occupation: _____

Mother's Name(Capital Letters): _____

Education: _____ Occupation: _____

OTHER INFORMATION:

Distance from Home: _____ School Transport: Yes No

Any other information: _____

I _____ hereby declare that the above given information Filled is true to best of my knowledge and I agree to abide by the school rules and regulations.

Date: _____

Place: _____

Signature/Thumb Impression of Parents

For Office Use Only

Student's Name: _____

Admission No.: _____

Registration Fee: _____

Admitted / Rejected: _____

Signature of Principal