

# VIDYA DEEP SAINIK SCHOOL

Mawana Bypass Road, Mawana, Meerut - 250401  
+91-8445420090, 9675000684

FORM No. 1004

Date

## ENTRANCE EXAM FORM

ADMISSION FOR CLASS \_\_\_\_\_

STUDENT'S NAME \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

RELIGION \_\_\_\_\_ NATIONALITY \_\_\_\_\_ GENDER \_\_\_\_\_

CATEGORY \_\_\_\_\_ OCCUPATION \_\_\_\_\_ ANNUAL INCOME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MOBILE NO. (WHATSAPP) \_\_\_\_\_ ALTERNATE MOBILE NO \_\_\_\_\_

EMAIL ID: \_\_\_\_\_

LAST SCHOOL ATTENDED	BOARD	MEDIUM	YEAR	CLASS PASSED	EXTRA CURRICULUM ACTIVITY

### DECLARATION BY THE PARENTS

Self Declaration- I hereby declare that the above information furnished by me is correct to the best of my knowledge and belief, If any information or documents supplied by found to be incorrect, I will be responsible for the same. I shall abide by the rules of the Vidya Deep Sainik School.

Date:

Signature of Parents