

LUCKY INTERNATIONAL SCHOOL

Recp. No. For office use Scholar No.

Sector-8 Kuri Bhagtasni Housing Board Jodhpur (Raj.) 342005 Website: www.luckyinternationalschool.org

	ession 20		Affix passport size photograph
Name of the student (First N	[ama)	(Middle Name)	(Surname)
Date of Birth D D M M Y		(In Words)	(Similar)
Nationality		Sex M I	(Please tick)
Category Gen	SC ST C	OBC Others	
Co-curricular			
Name of the Mother :			- 1
Educational Qualification :	Tanilla de la facilitation de la		
Occupation & Designation :			7/25/20 V 2000
Annual Income :			
Office Name & Address :			
Office Contact (Landline) :		Mobile Number	
Email id (if any) :	7. 465-19		
Any particular area in which the mother	r would like to be assist	tance to the school/class/students:	

Name of the Father	8	,
Educational Qualification	¥,	
Occupation & Designation	i,	
Annual Income	Ē,	
Office Name & Address		x 3 9
Office Contact (Landline)	ŧ	Mobile Number
Email id (if any)	8	
Residential Address	8 .	
Contact Number	Ŧ.	
Permanent Address	9	
Contact Number		
Name of the Guardian		
Name of the Guardian Educational Qualification		
Educational Qualification	:	
Educational Qualification	:	
Educational Qualification Occupation & Designation	\$ \$ \$	
Educational Qualification Occupation & Designation Annual Income	\$ \$ \$	
Educational Qualification Occupation & Designation Annual Income Office Name & Address	: :	Mobile Number
Educational Qualification Occupation & Designation Annual Income Office Name & Address	:	
Educational Qualification Occupation & Designation Annual Income Office Name & Address Office Contact (Landline)		Mobile Number
Educational Qualification Occupation & Designation Annual Income Office Name & Address Office Contact (Landline)		Mobile Number
Educational Qualification Occupation & Designation Annual Income Office Name & Address Office Contact (Landline) Email id (if any)	: : : : : : : : : : : : : : : : : : :	Mobile Number
Educational Qualification Occupation & Designation Annual Income Office Name & Address Office Contact (Landline) Email id (if any) In Case of Emergency; kindly Person's Name	: : : : : : : : : : : : : : : : : : :	Mobile Number

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STUDENT RELATED IMPORTANT INF	ORMATION		
Name of the School last attended:			Apr. (1997)
Class Last Attended in figure : -	(un words)		
Does the child have any special need/s			
If Yes, give details :			
Kindly affix photographs below (as ap			
Kindiy ariix pilotograpiis below (as ap			
		*	
	Father	Guardian	
Mother	Father	emerene es esta e a ≡	
Date :	Signature of Parent/Gua	ardian :	
FOR OFFICE USE ONLY			HALISTONIA HUNSASAHARI KARA
CHECKLIST			
Duly filled Registration Form.			
Three recent passport size photo	graphs.		
Copy of the Birth Certificate.	T. L. warningt		
	original (as and when acquired). of the previous class.(as and when acc	quired)	
	ass certificates issued by competent a		
Transport Form		•	
Medical Card			
Distriction No.	Date :		
Registration No			
Admission Granted to Class	Maria de la companya del companya de la companya de la companya del companya de la companya de l		
Scholar No.	Date :		
7			
House			