

LITTLE FLOWER HR. SEC. SCHOOL

Pushpa Nagar, Gairatganj, Raisen Dt., M.P. 464884

Contact No.: 7771088871

STATEMENT TO BE FILLED AND SIGNED BY PARENTS



Name.....Surname.....

Class..... Div..... Roll No. Admission No.

Date of Birth.....House.....

SSSM ID Aadhar No.

Family ID.....Bank A/c No. IFSC code.....

Names of parents

Father's Name..... Mob. No.....

Mother's Name..... Mob. No.....

Address:.....

.....

.....

Phone No..... E-mail.....

Occupation of parents

FatherMother.....

Office Address..... Tel. No.

Own brother(s)/sister(s)

1. NameClass..... Div..... Admission. No.....

2. NameClass..... Div..... Admission. No.....

Transport information:

Bus Number

Bus Van Own Vehicle

(Specimen signatures of the parents/guardian)

Father.....Mother.....Guardian.....

NOTE: The particulars above should be filled by parents in capital letters with a marker pen.