

Torbung Govindpur, PO – Moirang Bishnupur District, Manipur 795133

	Registration No.
	(For office use only)
Form No.	
	ADMISSION FORM
Particulars of students (IN	BLOCK LETTERS)
Full Name:	
Father's Name:	
Mother's Name:	
Guardian's Name (if any):	
Correspondence Address:	Since 2011
Permanent Address:	
Aadhar No.:	
Date of Birth:/	_/(Format DD/MM/YY)
Nationality:	Religion:
Cast: SC ST	OBC Gender: Male Female
Phone/Mobile no:	STOPHER EDUCA
Name of Previous School:	
Standard to which admission i	s sought:
Optional Subject:	
1. Games & Sports	2. Dance & Music 3. Computer (only for class IX & X)
4. Painting, Arts & Crafts	5. Life Skill Development
Date:	

(Signature of Guardian)

Place:

(Signature of Applicant)

