

M. K. GANDHI ENGLISH MEDIUM PRIMARY SCHOOL

ADMISSION FORM : 2026-27

GR. NO.: _____

DATE: ____/____/20____

➤ **STUDENT FULL NAME:** PRAYAG NITIN GOHEL

➤ **MOTHER'S NAME:** BHUMIKA

➤ **DATE OF BIRTH (DD/MM/YYYY):** 14/11/2017

➤ **DOB (IN WORDS):** FOURTEENTH NOVEMBER TWO THOUSAND SEVENTEEN

➤ **ADDRESS:** BANDAR ROAD, PALA NO CHOWK BHABHA DALAL NI SHERI PORBANDAR

➤ **BIRTH PLACE:** RIDDHI HOSPITAL PORBANDAR ➤ **DISTRICT:** PORBANDAR ➤
STATE: GUJARAT

➤ **RELIGION:** HINDU ➤ **CASTE:** KHARVA ➤ **CATEGORY:** OBC

➤ **GENDER:** BOY ➤ **APPLIED STANDARD:** 3RD

➤ **LAST SCHOOL NAME:** K B TAJAWALA SCHOOL

➤ **UID:** 241101077792410004 ➤ **PEN NO:** _____

➤ **WHATSAPP NO:** 9727253514 ➤ **MOBILE NO:** _____

AFFIXED PASSPORT SIZE LATEST

DECLARATIONS:

I HEREBY DECLARE THAT THE INFORMATION PROVIDED IS TRUE TO THE BEST OF MY KNOWLEDGE. I AM FULLY AWARE OF THE CONSEQUENCES OF PROVIDING FALSE INFORMATION. I ALSO AGREE TO THE SCHOOL'S POLICIES AND REGULATIONS.

REQUIRED DOCUMENTS:

LC (TC) – TO BE SUBMITTED WITHIN 3 DAYS OF REOPENING , AADHAR CARD XEROX-1, RATION CARD XEROX-1, ELECTRICITY BILL XEROX -1, LATEST PASSPORT PHOTO-1 (WITH DATE), BANK PASSBOOK XEROX-1 (IF AVAILABLE)

GUARDIAN SIGNATURE: _____ **PRINCIPAL SIGNATURE:** _____