

M. K. GANDHI ENGLISH MEDIUM PRIMARY SCHOOL

ADMISSION FORM : 2026-27

GR. NO.: _____

DATE: ____/____/20____

- **STUDENT FULL NAME:** ARNAV SACHIN KANOJIYA
- **MOTHER'S NAME:** ARTI SACHIN KANOJIYA
- **DATE OF BIRTH (DD/MM/YYYY):** 24/05/2014
- **DOB (IN WORDS):** TWENTY-FOURTH MAY TWO THOUSAND FOURTEEN

AFFIXED PASSPORT SIZE LATEST

- **ADDRESS:** SHIVALI, NEAR KAILASH GARAGE STREET NO-5, PORBANDAR
- **BIRTH PLACE:** MUMBAI ➤ **DISTRICT:** PORBANDAR ➤ **STATE:** GUJARAT
- **RELIGION:** HINDU ➤ **CASTE:** DHOBI ➤ **CATEGORY:** OBC
- **GENDER:** BOY ➤ **APPLIED STANDARD:** 7TH
- **LAST SCHOOL NAME:** CHAM MEMORIAL SCHOOL
- **UID:** _____ ➤ **PEN NO:** _____
- **WHATSAPP NO:** 9664541688 ➤ **MOBILE NO:** _____

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:** _____