

M. K. GANDHI ENGLISH MEDIUM PRIMARY SCHOOL

ADMISSION FORM : 2026-27

GR. NO.: _____

DATE: ____/____/20____

- **STUDENT FULL NAME:** HIYANSH ROHIT DALKIYA
- **MOTHER'S NAME:** TWINKLE ROHIT DALKIYA
- **DATE OF BIRTH (DD/MM/YYYY):** 06/12/2020
- **DOB (IN WORDS):** SIXTH DECEMBER TWO THOUSAND TWENTY
- **ADDRESS:** KHARVAVAD, KALIVALI GALI, PORBANDAR
- **BIRTH PLACE:** PORBANDAR ➤ **DISTRICT:** PORBANDAR ➤ **STATE:** GUJARAT
- **RELIGION:** HINDU ➤ **CASTE:** KHARVA ➤ **CATEGORY:** OBC
- **GENDER:** BOY ➤ **APPLIED STANDARD:** BALVATIKA
- **WHATSAPP NO:** 7405625412 ➤ **MOBILE NO:** 9913569727

AFFIXED PASSPORT SIZE LATEST

DECLARATIONS:

MY SON OR DAUGHTER IS NOT STUDYING IN ANY OTHER SCHOOL. IF WE PROVIDE FALSE INFORMATION, WE ACCEPT THE ADMISSION MAY BE CANCELLED.

REQUIRED DOCUMENTS:

BIRTH CERTIFICATE XEROX, AADHAR CARD XEROX (STUDENT NAME MUST MATCH BIRTH CERTIFICATE), LATEST PASSPORT PHOTO-1 (WITH DATE), RATION CARD XEROX-1, ELECTRICITY BILL XEROX -1, BANK PASSBOOK XEROX-1 (IF AVAILABLE), JATI NO PURAVO OR FATHER CASTE CERTIFICATE OR FATHER TC(LC) OR ?50 AFFIDAVIT STAMP PAPER (SOGANAMU)

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