Session:_____

ADMISSION FORM

Side - 1

Admission Form No.	Roll No.	Room No. for Exam.	Class In Which Adm. Sought	Adm. / S.R. NO.	DATE OF ADM.

SHRIJI BABA SARASWATI BALIKA VIDYA MANDIR

(SENIOR SECONDARY SCHOOL), GOVERDHAN ROAD, MATHURA

E-mail : sjbvidyamandir2018@gmail.com Mob.: 7078697627

"STUDENT'S NAME (IN BLOCK LETTERS ONLY) (AS PER UDISE)"

AADHAR NO.	
UDISE-PEN NO.	
APPAR ID	

DOB AS PER AADHAR CARD
DATE OF BIRTH

PHOTOGRAPH

Self Attested Recent Photo of Candidate

CATEGORY

GENERAL ○ SC ○
OBC ○ ST ○
SPECIALLY ABLED ○

VIDYA BHARTI STUDENT YES ○ NO ○

"FATHER'S NAME (IN BLOCK LETTERS ONLY) AS PER AADHAR CARD"

"MOTHER'S NAME (IN BLOCK LETTERS ONLY) AS PER AADHAR CARD"

CORRECT METHOD ● WRONG METHOD