MAHARSHI MEHI VIDYAPEETH

(A School of Shiksha & Sanskar)

FOUNDER: MAHARSHI SANTSEVI PARAMHANS MANAGED BY: MAHARSHI MEHI VIDYA VIKAS TRUST

Affiliated to CBSE (10+2), New Delhi Affiliation No.: 3430281, School Code: 66472 LOHARDIH, KOLAKUSMA RO. | K.G. ASHRAM, DIST: DHANBAD - 828019 (JHARKHAND)

Website: www.mmvidyapeeth.com, Email: maharshimehivp@gmail.com

Mob: 0326 6001929 / 9279568756

REGISTRATION FORM

| | | FORM IN BLOCK LETTERS ONLY | | | | |
|--------------------|---------------------------------------------------------------------------------|------------------------------------|---------------------|--|-------|-----------|
| Form No Amount: | | Reg. No Receipt No.: | | | | |
| | | | | | Payme | ent Mode: |
| 1 | STL Scholar's Name (in full): | JDENT'S INFORMATION | | | | |
| 1. | | | | | | |
| | | | | | | |
| | | (In words): | | | | |
| | Place of Birth: | Student's Mother Tongu | e: | | | |
| | Religion:Heig | ht: | | | | |
| | Language Spoken at home: _ | | | | | |
| | Schedule Caste/Tribe/OBC/ | Minority/Gen: | | | | |
| | Reading in class: | Admission sought in class (In w | vords): | | | |
| | If they appeared at any earlie Year: Class: | er admission test of Maharshi Mehi | Vidyapeeth, if yes: | | | |
| 2. | Name of the Candidate's present school and the Board to which it is affiliated: | | | | | |
| | Father's Name: | Aadhar No.: | | | | |
| | Occupation: | | | | | |
| | Mother's Name: | Aadhar No.: | | | | |
| | Occupation: | | | | | |
| | Legal Guardian's Name: | Aadhar No.: | | | | |
| | Occupation: | | | | | |
| | Address: | | | | | |
| | At/Village: | P.O.: | | | | |
| | | State: | | | | |
| | | Mobile No.: | | | | |
| 3. | Permanent Address: | | | | | |
| | At/Village: | P.O.: | | | | |
| | | State: | | | | |
| 4. | Educational Qualification: | | | | | |
| • • | - | Income per Annum: | | | | |
| | | Income per Annum: | | | | |
| 5. | | disorder with Father or Mother: | | | | |

| 7. | Reason | for Seeking Admis | sion: | | |
|-------|------------------|----------------------------------------------|------------------|--------------|-------------------------------|
| 8. | Has you ability? | | ny special recog | gnition? Doe | es your child have any specia |
| 9. | Has he | suffered from Asth | ma/Epilepsy or | any other d | isorder? |
| 10. | What d | o you like your son | to be in future? | | |
| 11. | Have yo | | onnection with | the Mahars | hi Mehi Vidyapeeth? Please |
| 12. | | y relative of the boy ion, and relationsh | | itted here? | Give the name, year of |
| | | | | | |
| | | | SIBLING'S D | ETAILS | |
| Sl. I | No. | First Name | SIBLING'S D | ETAILS Age | School Attending |
| Sl. I | No. | First Name | 1 | | School Attending |
| Sl. I | No. | First Name | 1 | | School Attending |
| St. I | No. | First Name | 1 | | School Attending |
| St. I | No. | First Name | 1 | | School Attending |