



FORM FOR SCHOOL IDENTITY CARD

Student's Name _____ Class _____ Date of Birth _____

Sibling's Name _____ Class _____ Date of Birth _____

Address _____

Father's Mobile No. _____ Mother's Mobile No. _____

Mode of Transport: **Bus Route No** ____ / **Non Bus** (please tick as applicable)

Please fill in the information in capital letters

NAME	RELATIONSHIP TO STUDENT	PASTE PASSPORT SIZE PHOTOGRAPH

Parent's Signature