



WOODLAND ACADEMY

10+2 CBSE AFFILIATED AIR FORCE RAJAHI GORAKHPUR

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PASSPORT SIZE

PHOTO

FORM NO:-
ADMISSION NO. **1107**

DATE OF ADMISSION

PEN No.

STUDENT PROFILE

NAME OF PUPIL
IN CAPITAL LETTER

Admission sought for Class Academic year

Date Of Birth

Age of student as on 31st March

AADHAR No.

PLACE OF BIRTH STATE

NATIONALITY RELIGION

CATEGORY GEN OBC SC ST RTE DISABLED

GENDER MALE FEMALE

BLOOD GROUP

MOTHER NAME

OCCUPATION

WHATSAPP NO.

ANNUAL INCOME

FATHER NAME

OCCUPATION

WHATSAPP NO.

ANNUAL INCOME

RESIDENTIAL ADDRESS:

PREVIOUS ACADEMIC RECORD

NAME OF THRE PREVIOUS SCHOOL CLASS YEAR BOARD ROLL NO.

1- Whether student single child of parent Y N 2- Any other sibling in this school already studying Y N

I - Name Class

II - Name Class

Subject Proposed to Offer

1- 2- 3-

4- 5- 6-

DECLARATION BY THE PARENT

I hereby declare that the above information furnished by me is correct to the best of my knowledge & belief.
I shall abide the rules of the school.

Parents Signature

ACKNOWLEDGEMENT

Sr. No. **1107**
Name of the child
Class in which admission is sought for

Date
Session
Auth. Signature