



C.L.A. PUBLIC SCHOOL

Gaumat Road Bajna Mathura
Email Id: Clabajna@gmail.Com / /Phone: 8938800754
C.B.S.E BOARD

Dise Code

ADMISSION FORM

Registration No.
2131876

Note: Please fillup form in the Capital Letter only.

Student Full Name

Father Name

Mother Name

DOB

Gender

Category

Religion

DDMMYYYY

Male ☐ Female ☐

ST ☐ SC ☐ OBC ☐ General ☐

Aadhar Card No.

Mobile No.

Email Id

PARENTS/GUARDIAN DETAILS

Guardian Name

Occupation

Annual Income

Contact No.

Aadhar Card No.

SSSM Id

STUDENT MEDICAL DETAILS

Blood Group

Allergy to any medicine/food

Physically Handicaped/Disability

Any other health problem

RESIDENTIAL ADDRESS DETAILS

Full Address

State

City

Pincode

PERMANENT ADDRESS DETAILS

Full Address

State

City

Pincode

BANK ACCOUNT DETAILS

Bank Name

Branch

Account No.

Ifsc Code

ADMISSION DETAILS

Admission Class

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Medium

Hindi ☐ English ☐

Study Type

Regular ☐ Private ☐

LIST OF ENCLOSURES TO BE ATTACHED WITH THE APPLICATION FORM
(1) Passport size photograph
