



GARG'S SCHOLARS' INSTITUTE

ADMISSION FORM FOR THE SESSION

Name of the student

Class school

Contact number (Registered Mobile No.).....

Aggregate percentage of the Last exams Appeared

Father's Name Mr.

Occupation

Mother's Name Mrs.

Occupation

Parents' contact numbers

Residential address

.....

Subjects at GSI

Mode of payment Equal installments Two installments Single payment

The information furnished above is true and I/we agree to abide by the rules & regulations of the institute.

Date

Signature

For Office Use