

		APPL	ICATION F	ORM	- +1/+	-2	
Date of Birt	ch:/	/ Sex:	: Male Fe	male			
Communication Address:							Affix a recent colour photograph of the candidate
Pincode :				•••••			
Residence T	Celephone 1	No. with code :		•••••		••••	
Personal I	Details:	Gener al	ОВС		SC/ST		
	Father/Guardian					Mo ¹	ther
Name :							
Mobile No. :							
Occupation		••••					
Email id.							
Academic	details:						
Class	ass Name of School			Board		Year of bassing	Grade & % of marks obtained
X							
Current Ac	cademic s	tatus:					
Class	Plass Name of the School Board					Group	
XI					HSE		Biology
XII CBSE ICSE Com						puter Science	
<u> </u>	How did y	ou come to kno	ow about us? P	ut a 🗸	mark i	n the rele	evant box.
	Friends	Newspapers	Banners & B	oards	Others	s (Please	specify)

Course opted: (*Please put a* ✓ *mark against the course you wish to undergo*)

Class:	XI				XII				
Course:	Tuition	Tuit	Tuition + Entrance			Ent	rance Only		
					Additional		ľ	Mathematics	
Branch:	PCM		PCE		Subject:			Biology	
							Computer Science		
Subjects:	Physics	Cl	hemistry		Ма	iths		Biology	
Batch:	Morning		Evening		Sun	day		Vacation	

Declaration

I/We jointly and severally declare that the information furnished above is true to the best of my/our knowledge and belief. I/We give you authority to allot the timings and venues of the classes due to unavoidable circumstances even if they are in variance of our preferences. I/We have no objection in New Cristal Academy publishing my/my ward's photograph in newspapers and other promotional materials while announcing the results. I/We understand that fees once paid will not be refunded under any circumstances. I/We have gone through the rules and regulations of the Institution and agree to abide by it.

Signature of the Candidate:	 Signature of Parent/Guardian:
Place :	Date :

For Office use only

Amount Paid	Receipt No.	Date	DD/Cheque No.	Bank Name with place

Batch Allotted



