A Gateway of Innovations ...

CAMBRIDGE HEIGHTS SCHOOL, SAGAR, (M.P.)

STUDENT INFORMATION FORM

12-Digit Student PEN NO. (Permanent Education Number) : _____

DATE OF ADM. ___/____/_____ **ADM. NO.** _____ **FORM NO.** _____

STUDENT NAME _____ **DATE OF BIRTH** _____/_____/_____

FATHER NAME _____

MOTHER NAME _____

CLASS- _____ **GENDER-** _____ **CAST-** **GEN/OBC/SC/ST**

AADHAR NO. _____ - _____- _____ **STUDENT SAMGRA ID** _____

MOBILE NO. _____ _____ **ADDRESS-** _____ _____

BLOOD GROUP _____ **HEIGHT-** _____CM/Ft. **WEIGHT-** _____KG.

OTHER DETAILS

FATHER OCCUPATION - _____ **MOTHER OCCUPATION -** _____

ANNUAL INCOME - _____

BANK DETAILS

BANK NAME - _____

BRANCH - _____ IFSC CODE - _____

ACCOUNT NO. -