



TODDLERS ASHIANA

350, Sector-9D, Chandigarh

Mob: - +91-9872303509, 0172-2743826

Please paste
recent passport
size photograph
of the child

Please complete the following information in Capital Letters only.

Name of ChildMale/Female

Date of Birth(DD/MM/YYYY).....Aadhaar Card No.....

Age as on 31st March 2022.....Blood Group

Admission sought for Class.....

Parent's Information (To be filled in CAPITAL letters)

Father's Name.....Occupation.....

Designation Office Name & Address

Mother's Name..... Occupation

DesignationOffice Name & Address

Residence Address.....

Phone No. Residence

Mobile No. (F)..... (M)

E-mail id

Is the child suffering from any ailment or disease, if so give details

.....

.....
Principal

.....
Parent's signature

Documents to be attached:

3. Copy of the Birth Certificate
4. 2 Passport Size Photographs

(*Bring along the original Birth Certificate for verification at the time of submission of form.)

Note: - Any change in the above-submitted data must be informed to the school office with immediate effect.