

Date:

Date:

## KENDRIYA VIDYALAYA MOSCOW EMBASSY OF INDIA SCHOOL

**REGISTRATION FORM FOR SESSION 2024-2025** 

REG. NO.	

Photograph of the child

(Pass	port	size
(2 000	P	

Regist	tration for class	(Put tick mark	in appropriate box	)	
1- Nan 2. Sex	me of child in full (in Capital let	ters)			
		Day Mon	th Year		
3- Dat	e of Birth				
In wor	rds				
Λ	es en 24 02 2024 - Veer		Months	] Dovo	
	as on 31.03.2024 Years	<u>'</u>	Months	Days	
4. Blo	ood Group of the child				
5. Det	tails of Parents		. 11		F. H
	Name (in Conital latters)	IVI	other		Father
i	Name (in Capital letters)				
ii	Nationality Occupation				
	Occupation				
iv	Name of Office and full addi with Telephone/Mobile nun				
v	Full residential address with telephone numbers(with pro				
vi	E-mail id				
vii	Sibling name and class				
Categ	ory to which the Parent belong	j to: EOI	IC	KV	FC
	that I(Mother)	am a house wife			
all the anizat shap/fi	nployed /working ine regulations of the school. W ion regularly through Bank 're/natural calamities during th d reasons.	e also certify that the tu Transfer. We personally	ition fee and any o take the responsil	other fee of the s bility of getting	school will be paid by us our child insured against
Signa	ture of Mother			Signature of I	ather
	ed that Mr/Mrs ow. The Embassy / organization /		in the Embassy of _	/in th	e organization
		Office Seal:			the Mission /

Embassy/ Organization