

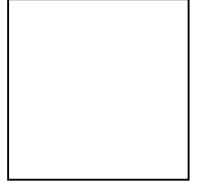
Form No. _____

Adm. No. _____

Date. _____



ASKARI CADET COLLEGE KALLAR KAHAR



ADMISSION FORM

(Please Write In Capital Letters)

Class _____

Full Name _____

Date of Birth _____

Father's /Guardian Name _____

Father's Occupation/Monthly Income _____

Religion _____

Present Address _____

Permanent Address _____

Telephone No (Home) _____ (Office) _____

Give the Name (With Class) of your real brothers and sisters if studying in this school

School last Attended _____

I hereby Solemnly declare that I will strictly abide by the rules and regulations of the school.

My Part, Principal shall be justified to take any action. The particulars given above are correct to the best of my knowledge and belief.

Parents/Guardian

Signature _____

For Office Use

Remarks by the admission committee _____

Approved/Not Approved

نوٹ: ادا شدہ فیس ناقابل واپسی ہے۔

Note: Total Fee deposited is non refundable.

Principal