

Day Care Center for Children, SVNIT - Surat

ADMISSION FORM

1.	Name of the Child	
2.	Pet Name (if any)	-
3.	Residential Address	-
4.	Residential Telephone No	
5.	Date of Birth	(Birth certificate to be attached)
6.	Age	-
7.	Gender (Boy/Girl)	-
8.	a. Father's Name	-
	b. Occupation	-
	c. Office Address	
	d. Phone	- (Office) (Mobile)

PHOTOGRAPH BANK

Child's Name,	:-		
His/Her pet name,			
habits and other			Child
specific details			Photograph
Mother's Name	:-		
Mother's	:-		
occupation and			Mother's
address			Photograph
Mother's Phone			
Father's Name	:-		
Father's	:-		
occupation and			Father's
address			Photograph
Father's Phone			
			1
Guardian's Name	:-		
Relation with	:-		
child			Guardian's
			Photograph
Guardian's Phone	:-		
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Attachments: 1) Birth certificate 2) Duly filled form

Note: Attachments along with one-month advance day care charges and registration fee must be submitted to Dr. Urvashi Kaushal (Mobile no.:9998218126) or Dr. Twinkle R. Singh (Mobile no.:9898374543) in Maths and Humanities Department.

