

AMITY INSTITUTE FOR COMPETITIVE EXAMINATIONS

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Sector 6, Vasundhara, Ghaziabad - 201012, U.P.

ADMISSION FORM

Mathematics Olympiad Workshop

Class studying in _____ Hostel Day Boarder

1. Name of student (IN CAPITALS) : _____

2. Date of Birth Day Month Year

3. Father's / Mother's Name : _____

4. Address for correspondence (IN CAPITALS) _____

5. Permanent Address (IN CAPITALS) _____

6. Occupation of Father / Mother _____ Mobile No. _____

Phone No. (Residence) : _____ Phone No. (Office) : _____

7. Email_ID _____

8. School Name _____

Affix TWO
passport Size
Photographs

Class	Grade / Percentage obtained			Remarks
	English	Mathematics	Science	
VI th				
VII th				
VIII th				
IX th				
X th				

Have you participated in any National / International Olympiad (Yes / No); if yes, name of the Olympiad you participated in :

S. No.	Name of the Olympiad	Year	Position	Grade	Rank Obtained

Note : Enclose 2 passport size photo and last marksheet copy.

I hereby declare that all the particulars furnished above are true to the best of my knowledge and belief.

Cheque No. _____ Bank _____ Date : _____

Date : _____ Place _____

(Signature of Parents / Guardian)

(Signature of Student)