

ARAM INSTITUTE

Knowledge Through Trust

NAME OF THE STUDENT :	
FATHER'S NAME :	. Protograph and son protograph or with the protograph of the prot
COURSE : SESSION	PR Nith Sight Proper
CONTACT DETAILS :	. Thu
Titele 1 NAME OF PARENT/GUARDIAN LIVING AT THE HOME ADDRI	ESS
Name of Parent's :	
Relationship with the Student:	Protograph and son
UID Proof Details :	Protograph and son
Address :	" Thursb.
Mobile Number :	
Titele 2	
Name of Parent's :	
Relationship with the Student:	pp. protograp ^t and son pp. protograp and son pp. protograph and pr
UID Proof Details :	pp pho sidlinges
Address :	" Thurst
Mobile Number :	
Titele 3	
Name of Parent's :	&
Relationship with the Student:	otografia
UID Proof Details :	pp project of specific representation of the specific repre
Address :	Thurth
Mobile Number :	
Important - Instructions	

- No Tampering with the form will be allowed and anybody found tampering will be immediately removed from the rolls of the college.
- If anybody's parent/s passes away who will be authorized for that student in that case, it should be intimated in advance via affidavit.
- If anybody gets married midway who will be the guardian thereon, and if husband, then his attested photograph with duly signed consent from the parent/guardian is needed.
- If someone needs to change his guardian it will only be possible after a period of 6 months.
- No false information to be put in form and if anybody does so he/she will be terminated Immediately
- Any other person apart from the authorized person, if he/she comes and puts pressure on authorities for students leave, the parents/students they themselves be responsible for any mishap if so it occurs
- Signatures of parent/guardian to be matched and verified at the time of admission.

AUTH. SIGNATORY