

SUSHILA BIRLA GIRLS' SCHOOL IDENTITY CARD PROFORMA

PLEASE FILL THIS FORM IN CAPITAL LETTERS AND ATTACH WITH A GEMS CLIP A RECENT PASSPORT SIZE

PHOT	OGRAPH OF T	HESTUD	ENT IN SCH	HOOL UN	IFORM V	VITH BLUE	EBACKGR	OUND
STUDENT'S NAME:								
CLASS:			SECTION:		(section to be filled up by class teacher)			
SESSION:	2019 - 2020	DATE	OF BIRTH:					
GAURDIAN'S NAME:								
ADDRESS:				84 8	6 8 S		3 2 1	
						PIN		
PHONE NO.								