

FREE BIRDS SPECIAL SCHOOL MANSEHRA KPK, PAKISTAN

(A PROJECT OF FBRS)

Admission Form

Child Name:		Father's Name:	
Mother's Name:	Date of Birth:		Disability
Gender:	Religion	Nationality:	()
Mother Tongue:	Address:		
Contact No:	(1)	(2)	Date of Admission:
Father's Occupation	Fat	her CNIC#:	Father Monthly Income
Mother's Occupation:		Mother's CNIC #:	
If father is not alive or ab	road or separated then	mention guardian name:	0
Name:	Contact#:		CNIC #
Please mention the name	es and contact numbers	who will pick the child from	the School:
Name:	Relationship:	Contact #:	CNIC #
Name:	Relationship:	Contact #:	CNIC #
		·	to be photographed. The photos will be ts, Website, Facebook and Instagram.
Yes, I agree that my child	can be photographed		
Please Provide Follo	owing Documents	at the time of Admiss	ion:
a) Completed reg d) Copy of disabil		ent passport size photograp y of birth certificate	h of child c) Copy of CNICs
FOR OFFICE USE ONL	Y: Admission is g	ranted:	_
Admission committee Ap	pproved:		
Member 1:		Member 2:	
Principal:		CEO:	