

PIONEER CONVENT

Mahalaxmi Nagar, Opp. Bombay Hospital, Ring Road, INDORE Phone No.: 0731-2551098, 2570645, Email: pio con@rediffmail.com

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Affiliti	ion No. 1030162		School Code : 14013	
Book	: No	SI.No.	Addmission No. P-1425	
1.	Name of Pupil	LALIT	MARU	
2.	Mothers Name	MRS. I	MANJU MARU	
3.	Fathers / Guardians N	ame MR.	KHANYALAL MARU	
4.	Nationality	INDIAN		
5.	Whether the Candidat	te belongs to Sched	eduled Caste or Scheduled Tribe	
6.			class 1107/16 with Florent	<u>) </u>
7.			g to Admission Register (in fitures)	<u>o_</u>
	(In words) Fout	January	y Two thousand	
8.	Class in which the pur	oil last studies (in fig	gures) XII (in words) Twelth	_
9.	School/Board Annual	Examination last ta	taken with result Twelth with pas	<u>&</u>
10.	Whether failed if so or			
11.	Subject Studied 1		sec 3 Chemistry 4 Biology 5 P.E	
	6	<u>U-</u> 7 <u>U</u>	<u> </u>	
12.	Whether qualified for	promotion to the hig	iger class	
	if so, to which class (ir	nfigures)	(inword)	* 3 p. 3
13.	Month up to which the	(pupil has paid) sc	chool dues/paid <u>No Dues</u>	
14.	Any fee concession a	vailed of : so, the na	nature of such concession	
15.	Total No. of working d	ays 186	16. Total No. of working days present 160	
17.,	Whether NCC Cade/E	3oy Scout/Girl Guid	ide (details may be given)	
18.	Games played or ex	dra-curricular activ	ivities in which the pupil usually took part (men	tion
	achievement level the	erein)	19. General Conduct	
20.	Date of application for	certificate 22	07 18 21. Date of issue of certificate 23 07	48
22.	REasons for leaving t	he school	Twelfth Tessed	<u>. </u>
23.	Any other remarks	10 No) · · · · · · · · · · · · · · · · · · ·	
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Op.	Shirthna	A STATE OF THE STA	Brood Same	2

Signature of Class Teacher

Checked by (state full Name and Designation)

Principal SBAL