

DAY MOIL PUBLIC SCHOOL

Proforma for Nomination as Parents Representative 2024-2025

(To be fill in by the Parent in his/her own handwriting and submitted at the time of scheduled date of PTM of your ward.)

1. Name of the Parents (Father /Mother) पालकांचे नाव (आई/वडील):

Mr./Mrs. (श्री/श्रीमती).....

2. Educational Qualification (शैक्षणिक पात्रता):

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3. Profession (व्यवसाय):

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4. Phone No (दुरध्वनी क्र): WhatsAppNo.....

5. Current Residential Address (वर्तमान रहिवासी पत्ता):

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6. Name of the Ward: Ms./Mst. (पाल्याचे नाव: कुमार,/कुमारी)

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Std. (वर्ग.) Division (तुकडी):

Name & Signature of Parent with Date (पालकांचे नाव स्वाक्षरी आणि दिनांक): -

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