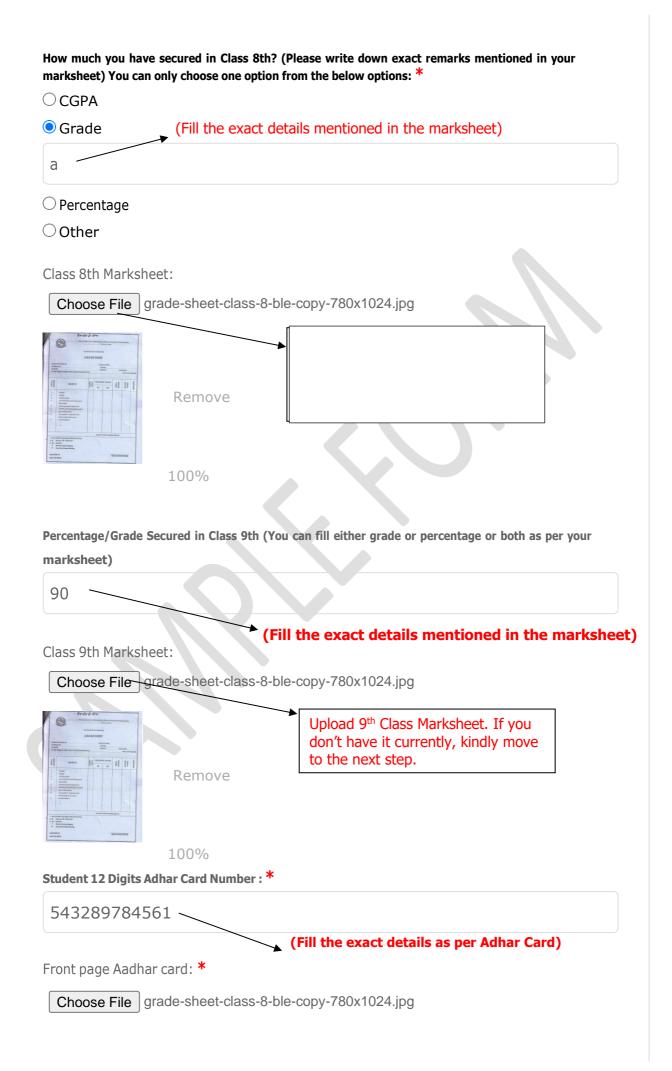
Please fill the complete form. Fields with "*" are mandatory to fill. If you do not know the answer of any field, you can put "Not Applicable" or "NA".

√ 14cwspaper ✓ 50Clai	riedia — School Staff — Top Meuron	s Team OYoutube Whatsapp msg
Others		
Student Full Name: *		
Kamal Sharma		
Gender: * ○ Male○ F	Female	
Category: * 💿 Genera	al OBC SC ST	
Are your physically hand	dicapped?:* OYes No	If you have any disability like Dear Dumb, Loss of Hand etc., fill Yes
Date of Birth * (DD/MM/)	(YYY)	
Date of Birth * (DD/MM/Y	(YYY)	
01/01/2007	communications will be sent on the gi	ven email ID) * You will receive all information on emails hence fill the correct information.
01/01/2007 Email ID (All important of Please double check kamal.sharma@	communications will be sent on the given and address Ogmail.com	You will receive all information on emails hence fill the correct information.
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O1/O1/2007 Email ID (All important Please double check kamal.sharma@ Primary Mobile No. (Please 9828433692	communications will be sent on the given and address Ogmail.com	You will receive all information on emails hence fill the correct information. a all communications will be done) *
01/01/2007 Email ID (All important of Please double check kamal.sharma@ Primary Mobile No. (Please 9828433692 Secondary Mobile No: (I	communications will be sent on the given and address Ogmail.com ase fill your primary number on which	You will receive all information on emails hence fill the correct information. a all communications will be done) *
01/01/2007 Email ID (All important of Please double check kamal.sharma@ Primary Mobile No. (Please 9828433692 Secondary Mobile No: (I	gmail.com ase fill your primary number on which f you are using alternate number plea	You will receive all information on emails hence fill the correct information. a all communications will be done) *

Residence Address * P No 47 Shyam Nagar Near RTO Office State * Rajasthan Select your state from the list District (Please choose option other if your district is not in the list * Select you district after selecting the state Jaipur **Pincode** 302019 Father Full Name (If father is not alive, please put "late" before his name) * Mr. CK Sharma (If your father is not alive then write: Late Mr. CK Sharma) **Father Occupation** -(If your father is not alive then leave it blank) Restaurant Manager Father Mobile No. 9828474156 Mother Full Name (If mother is not alive, please put "late" before her name) * Mrs. Vinita Sharma (If your mother is not alive then write: Late Mrs. Vinit Sharma) Mother Occupation (you can put 'House Wife' if your mother is not in job) (If your mother is not alive then leave it blank) Housewife

Mother Mobile No.	
Combined Annual Income of parent Approx (in full digits i.e. 60,000 or 1,50,000 etc.) *	
200000	
Which class you are Currently Studying in *	
Oclass X (Session 2021-2022)	
Currently Studying School Name: *	
Govt Sr. Sec School Sanganer	
Currently Studying School Address: *	
Sanganer Near Rathi Restaurant Jaipur Rajasthan	
Rajasthan Board of Secondary Education, Ajmer	
Current Medium in School * Hindi English Others	
Which Primary stream you would be choosing for career and would like to take coaching in *	
○ Engineering(JEE) ○ Medical (NEET) ○ Not Yet Decided	
If you have not decided what Subject you will take in Class XI then select Not Yet De	cide
Which medium of instruction you are planning to go in Class XI & XII(Ex Hindi, English, If you do no	ot
know you can write 'Not Yet Decided'): *	
English	
Which medium of instruction you would like to take coaching in (Please Note: currently we are planning to take classes in English only , but if we have Lot of numbers , we may think of running H medium classes too.) *	indi
● English ○ Hindi	
In case you get selected for offline classes at centre in Jaipur, would you be able to join classes i Jaipur, Rajasthan, free accommodation will be provided by Top Neurons? (Please note offline class will be provided in Jaipur only) *	
Yes ○ No ○ I am not sure	





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Back page Aadhar card:

Choose File No file chosen

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Student Passport Photo: *

Choose File 921109.png



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Any other information you would like to give to support your application (i.e. If you have performed well in any competition exam in past, good performance in Olympiad exams, got any award/prizes, got 1st/2nd rank in class etc.)

In Class 8th i got first rank in my school. I have also participated in Annual Fund

SAVE & SUBMIT

Check all the filled details carefully, once you have verified all the details kindly save and submit

If you face any problem during filling this application form please contact us: (Monday - Saturday 10 AM - 6 PM) 7417401463, 6351677826, 9828433692