



MANASTHALI EDUCATION CENTRE

Affiliated To C.B.S.E., New Delhi

Reoti, Ballia (U.P.)

CONVEYANCE FORM

(To be filled in by the guardian)

-
1. Name of Student
 2. Guardian's Name
 3. From Village Distance
 4. Type of Conveyance.....
-

1. I declare that the informations given by me are true and correct.
2. School will not be responsible for any injuries or accidents (mishaps) with my child in school premises.
3. I acknowledge to have fully read the prospectus and declare that I have understood all the provision indicated therein and to abide by it.
4. I hereby declare that all the particulars stated by me in this application are true to the best of my knowledge and belief. I understand that my admission is liable to be cancelled if found any statement/fact false/wrong.
5. I understand that the school has right to add/delete/change the syllabi, program structure, rules and regulation as and when required.
6. I understand that the FEES once paid for conveyance will NOT BE REFUNDED.

Place:

Date :

.....
Signature of the Parent