

National Public School, Gottigere



Academic Year 20 _____ - 20 ____

(To be used for change of Address/Name/Contact Numbers/Mail ID/any other contact details)

This is to inform about the change in contact details of my child

studying in _____ (Class & Section). Kindly make a note of the changed ____

(*Name / Parent Name/ Mobile Number / Residence Address/ Residence Phone Number/ Mail ID*) and update your records.

Name of the Student		
Name of the Parent	<u>Father</u>	<u>Mother</u>
Changed information(*) (To be written in capital letters) with proper titles		
Any other Specification/detail		

*<u>Please provide the photocopy of the necessary document(s) as proof.</u>

- For change of address- Aadhar Card/ Passport/ Electricity Bill/ Rental Agreement/ BSNL Bill
- For change in parent name- Aadhar Card/ Passport
- For change in student name- Notarized Affidavit/ Paper Advertisement

DECLARATION BY THE PARENT

All information provided above is true and factual and validated with evidence.

Father's Name: _____

Father's Signature:

Father's Contact Details:

Mother's Signature:

Mother's Contact Details:

Mother's name:

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For Office Use Only		
Requires proof(s) attached : (Yes/No)	Signature:	
Database Updated: (Yes/No):	Name of the Teacher In Charge:	
Database Updated On :	Signature of the Teacher In Charge:	
Signature of the Principal:		