

ANGEL SALON & TRAINING CENTRE
#102, BLOCK IIInd, GANGA SHOPPING CENTRE, SECTOR 29, NOIDA.

Course : A B C D E F G

Photograph

Registration No: ----- Admn. No. -----

1. Name of the Candidate:
(In Block Letters)

2. Name of the Parent/Guardian:

3. Address:
(During Term)

4. Address:
(During Vacation)

5. Medium: Hindi/English

6. Permanent Address:

7. Age , Date of Birth (In Figure and Words) :

8. Parent's/Guardian's Occupation

9. Annual Income of Parent/Guardian:

10. Nationality and Religion:

11. Whether Deaf and Dumb: Yes/No

Signature of Candidate : -----

Note:

1. No fees will be charged from Deaf and Dumb.