

For Office Use Only
Form Number: 24MHS00001
Transfer Certificate No.:
Admission Fees Receipt No.:
Hostel Form No. (if any):

Date: __/__/____
Date: __/__/____
Date: __/__/____
Date: __/__/____

Admission No.:
Scholar No.:
Login ID:
CBSE Registration No.:

MACRO VISION ACADEMY

Vivara Shivar, Savda Road, Raver, Dist – Jalgaon - 425508
CBSE Affiliation No. 1130183, School Code: 30236,
Email: ravermvas@gmail.com, website: www.macrovisionraver.org

APPLICATION FOR ADMISSION Session 2025-26

Student's
Recent
Passport Size
Photograph
for ID Card &
School Record
Paste it not
to staple

Father's
Recent
Passport Size
Photograph
for ID Card &
School Record
Paste it not
to staple

Mother's
Recent
Passport Size
Photograph
for ID Card &
School Record
Paste it not
to staple

Local
Guardian's
Recent Passport
Size Photograph
for ID
! Card &
School Record
Paste it not
to! staple

Class: Admission type:

Student's Detail

Name:

Nationality: Mother Tongue:

Date of Birth (dd/mm/yyyy): __/__/____ Place of Birth:

Date of Birth (In words):

Gender: Male/Female/Any other Single Girl Child: Yes/No

Specially abled: Yes/No, (If Yes, pls. describe)

Religion: Caste: Sub Caste:

Height: cm, Weight: Kgs. , Any other Medical Illness:-

Category: ST/SC/OBC/EWS/General

Blood group: Allergic to:

Aadhar No.:

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Samagra ID (Family ID & Child ID):

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Mobile No. (for Messaging):

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Last School Attended:

Name of Board: CBSE/ICSE/IB/State Board/Any other (Pls. specify)

Subject	Maximum Marks	Marks Obtained	Percentage of Marks	Remarks

Father's Detail
Name:
Mobile Number:
Aadhar Number:
Qualification:
Occupation/Designation:
Email:

Mother's Detail
Name:
Mobile Number:
Aadhar Number:
Qualification:
Occupation/Designation:
Email:

Details of Siblings (if any):

01. Name: Brother/Sister
Date of Birth: If Studying, Name of Institute: Class:

02. Name: Brother/Sister
Date of Birth: If Studying, Name of Institute: Class:

Annual Family Income: Rs. _____

Present Residential Address:

Permanent Residential Address:

Subject Opted For Class:

Sr.No	Subject Code	Subject
1		
2		
3		
4		
5		
6		
7		

Declaration (by Father/Mother or Guardian):

I hereby declare that the above information including Name of Candidate, Father's/Mother's, Guardian's and date of birth furnished by me is correct to the best of my knowledge & belief. I will abide by the rules of the school.

Signature Father/Mother/Guardian
Name: _____
Date: __/__/____

Correct entries from the Admission Forms to Admission and Withdrawal Register have been made on page no. _____
on Dated __/__/____

Signature
AI-C/Accountant

Principal
Macro Vision Academy, Raver

*In Case, student is from other board, Transfer Certificate should be countersigned by the Competent Authority.