

Form for becoming a Member of the SLFC- 2026-27

1. Name of the applicant who wishes to be a SLFC member (if both the parents are not available the guardian of the ward will be eligible): -----

2. Please enter your Email ID: -----

3. Relation with your child: (Please tick in appropriate column)

Father ()/ Mother ()/Guardian ()

4. Name of your child: -----

5. School Reg. No. of your child (scholar no.): -----

6. Class and Section of your ward: -----

7. Mobile number and WhatsApp number of the applicant: -----

8. Cleared all the dues mentioned in point no.2 and 7 of the conditions in the PDF

Yes () No ()

9 Aadhar Card No.: -----

10. Mobile Number: -----

Please attach the relevant document of-

(a) Photocopy of Highest qualification certificate / marksheet of the applicant

(b) Fee Receipt for 1" quarter financial year 2026-2027.

(c) Photocopy of Aadhar card of the applicant

Date:

Signature of the applicant