

MANAS

Manas Study Centre

Nurturing your dreams...

Registration No. _____

Manas Talent Search

Affix passport size photograph

Name: _____

Date of Birth: _____ Gender: Male Female

Father's Name: _____

Mother's Name: _____

Address: _____

City: _____ State: _____ PIN code: _____ e-mail: _____

Contact No. _____ Parents No. _____

Please tick (✓) the class you applying for & mention the date you want to appear for the selection test.

Applying For ▶	Class XIth <input type="checkbox"/>	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Class XIIth <input type="checkbox"/>	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Category: General OBC (NC) SC/ST PD

Class	Name of School/College	Year	Board
X th			
XI th			

Declaration:

- I hereby declare that the information provided by me in the Application Form are true and correct to the best of my knowledge.
- My signature below certifies that I have read, understood and agree to the all rules and regulation of the Institute.

Signature (applicant) with date

Signature (Guardian) with date

Manas Study Centre

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Admit Card

Registration No. _____

Applying For XIth XIIth

Affix passport size photograph

Name: _____

Test Centre _____ Date _____ Time _____

Signature of applicant

Invigilator

Auth. Signatory
(Manas Study Centre)