

CLASS/SEC: \_\_\_\_\_

Annexure # 1

# FFC MODEL SCHOOL, GM

## STUDENT'S BIO DATA

### (FOR FMS STUDENT'S FILE)

(To be filled by parents)

**STUDENT'S NAME:** \_\_\_\_\_

**DATE OF BIRTH (IN FIGURE):** \_\_\_\_\_ **B. Form/CNIC #** \_\_\_\_\_  
dd / mm / yy

**FATHER'S NAME:** \_\_\_\_\_ **P.NO.** \_\_\_\_\_

Father's CNIC # \_\_\_\_\_ E-Mail \_\_\_\_\_

**CONTACT NO. (OFFICE)** \_\_\_\_\_ **(RESIDENCE)** \_\_\_\_\_ **CELL #** \_\_\_\_\_

**FATHER'S DESIGNATION:** \_\_\_\_\_

( DEPARTMENT / SECTION ) \_\_\_\_\_

**ADDRESS (PRESENT):** \_\_\_\_\_

(PERMANENT): \_\_\_\_\_

**HEALTH PROBLEM / PRECAUTION / ALLERGIES ( IF ANY )** \_\_\_\_\_

**NAMES OF BROTHERS & SISTERS STUDYING IN FFC MODEL SCHOOL:**

S/NO.	NAME	CLASS / SEC
1		
2		
3		
4		
5		
6		

Date: \_\_\_\_\_

( PARENT'S SPECIMEN SIGNATURE )

( 1 ) FATHER \_\_\_\_\_

( 2 ) MOTHER \_\_\_\_\_