

MOUNT CARMEL SCHOOL,
SECTOR 47-B, CHANDIGARH

CONSENT FORM

1. Full Name of the Student : _____
2. Class & Section : _____, Admission No.: _____
3. Gender: _____
4. Name of Father/ Guardian: _____
5. Mobile Number: _____
6. Name of Mother: _____
7. Mobile Number: _____
8. Email id: _____
9. Whether Resident of Chandigarh: _____
10. Complete Residential Address :

**11. Are you willing to send your ward to School on voluntary basis,
(Kindly Answer in Yes / No)**

Signature of Father / Guardian : _____

Signature of Mother: _____

Date: _____