

REGISTRATION FORM



Website : ethicsacademy.in, E-mail: sanjeev@ethicsacademy.in

Office Use: Registration No.

1. Name:

2. Medium: English
UPSC ROLL NO. (If available)

3. Optional Subject: Qualification:

SIGNATURE ACROSS
THE PICTURE

4. Date of Birth: Date Month Year Home Town/District:

5. Education :

Graduation: College Name Year:

Senior Secondary: School Name Year:

6. Mother's / Father's Name:

7. Occupation:

8. FULL ADDRESS

Permanent:

Local:

PIN Phone

ICE No. E-mail

9. Course/s for which you seek admission
(Please refer back page for the details of the courses)

10. How have you come to know about ETHICS ?

Parents Friends Teachers Newspapers Magazine Website Others

DATE:

Counsellor's Signature

Student's Signature

* I agree to abide by the rules and regulations of Khan Study Group.