	John Academy of Science Faisa ADMISSION FO		Attach a Recent	
	ADMISSION I C		Picture Here	
PERSONAL INFORMA	TION			
Name				
Year Month(s)		Day Month	Year	
Age: Gend	er: M F Date of Birth:			
ADMISSION DETAILS Admissions Required For				
	Class – 9 th Biology	1 st year	Pre-Medical Pre- Engineering	
Class – 8 th	Class – 10 th	2 nd year	ICS I.Com	
SUBJECT DETAILS			_	
		\square		
ACADEMIC DETAILS				
LAST CLASS	INSTITUTE	OBT. MARKS	TOTAL MARKS	
PARENT / GUARDIAN INFORMATION				
Name :				
Name .		Science 1	usa al	
CNIC No:				
Relation: Occupation:				
Contact-I:		Contact-II:		
Address:				
Mother Name :				
Kinship If Any:				

RULES & REGULATIONS

- ✓ Dues once paid are neither refundable nor adjustable in any case. Fee will not be adjusted against any other student dues.
- ✓ Sessions timing are subjected to the availability of the teachers and can be amended as per requiremnt.
- \checkmark Parents must attend the office regularly to know the progress of the student.
- ✓ Tuition fee or any other charges are payable, without fine on or before the due date. After the due date, fine will be charged on per day basis.
- \checkmark The student will be struck off due to non-payment after two months of due date.
- ✓ Payment of fee will be made in full. There is no provision of paying the fee in instalments.
- \checkmark Misbehaviour with any teacher or student will be culpable.
- \checkmark Any damages by the student will be charged in full.
- \checkmark Institution will not, in any case be responsible for any loss suffered by student.
- \checkmark Decision of the administration will be final in any case.
- ✓ Smoking and use of mobile phones is stric<mark>tly prohi</mark>bited in the campus.
- ✓ Parking at your on risks.
- \checkmark Decision of administration will be final in any case.

DECLARATION

I, hereby certify that the information given here is correct to the best of my knowledge and belief I understand that I will abide by all the present rules and regulation of the institute and those that will be implemented time by time. I acknowledge that the administration reserves the right to dismiss student and return them home, without any refund of fees for violating the institute rules or other such conditions. I, therefore, agree to uphold all rules & regulations and cooperate with administration and teachers.

Signature of Father / Guardian		Signature of Student		
	FOR OFFIC	E USE ONLY		
Reg. No.:	Class:	Roll No.:		
Total Fee:	Received:	Receipt No.:		
Balance (if any):	_ Due Date for balance:			
Remarks:				
\sim 1 $n h u$	Acad	Science Ras		
Admission Officer: Campus Manager :				
W	HERE YOU FIN	D CIpha???		
Personal Resources 🔲 T.V Add	Rikshaw Flex	Social Media 🔲 Other:		
	ADDRES	S		
CAMPUS 1 (Boys Campus)10		dar Bazar G.M Abad Faisalabad. 22-6056545		
CAMPUS 2 (Girls Campus)12 Main Nar Wal		aran Wala Chowk Faisalabad. Contact: 0321-6035745		
	OUR PROJ	ECT		
Colpha The	lpha S	 Play group to Middle Play group to 5th Middle classes only for girls 		
SCHOOL	gn Your Future W	Vith Ipha Admission		