



Basic Information

Student Name : ABDUL RASHEED

Father Name : ASIF ULLA

Mother Name : Rahathunnisa

Date Of Birth : 06-03-2009

Age : 2

Gender : Boy

Permanent Address : Dr R M L NAGAR 1st STAGE 20th CROSSOPP KANAKA
VIDYA SAMASTE SHIMOGA

Mobile : 9986775641

Email :

Education Information

Class : Class-10

Section : B

Medium : English

RTE : No

Admission Type : Re Admission

Admission No. : 36/2015-16

Child U Dise Code/STS :

Admission Date : 30-11--0001

Another Mobile :

Email :

Other Information

Nationality :

Religion :

Category :

Caste : Muslim

Mother Tongue :

Father's Qualification :

Father's Occupation :

Mother's Qualification :

Mother's Occupation :

Student Account No. :

Income Certificate :

