

NAME AND ADDRESS OF THE SCHOOL

THE PARENT - TEACHERS ASSOCIATION – EXECUTIVE COMMITTEE (PTA-EC) YEAR 2024-2025 ELECTION FORM OF NOMINATION FOR THE ACADEMIC YEAR (PLEASE WRITE IN CAPITAL LETTERS)	
STUDENT'S NAME	
STUDENT'S PRESENT ADDRESS	
STUDENT'S GRADE/ STANDARD IN THE CURRENT ACADEMIC YEAR	
YEAR AND STANDARD IN WHICH THE STUDENT FIRST ENTERED THE SCHOOL	
STUDENT'S ROLL NO.	
STUDENT'S AADHAAR NO.	
STUDENT'S G.R. NO.	
WHICH OF THE PARENT IS SEEKING ELECTION AS A PTA-EC MEMBER (FATHER/MOTHER)	
NAME OF THE PARENT APPLYING	
WHETHER PARENT HAS PREVIOUSLY BEEN A PTA-EC MEMBER AND IF YES, FOR WHICH ACADEMIC YEARS	
DETAILS OF THE POST WHICH THE PARENT IS CONTESTING: THE PARENT CANNOT CONTEST FOR MORE THAN ONE POST TICK (✓) IN THE BOX THE PREFERRED APPLICABLE POST	a. VICE CHAIRPERSON <input type="checkbox"/> b. JOINT SECRETARY <input type="checkbox"/> c. MEMBER <input type="checkbox"/>
MENTION THE CASTE / CATEGORY IF THE NOMINATION IS FOR RESERVED POST	
APPLICANTS SIGNATURE AND DATE	
DATE THE APPLICATION WAS RECEIVED IN SCHOOL OFFICE	
NOTE:- 1. The application should be filled by the parent notified as 'Member' 2. The applicant cannot seek election for more than ONE post. 3. Forms received after _____ which is the last date of receipt of nomination, will be rejected. 4. Forms will be scrutinized to ensure compliance with the requirements of Acts and Rules. 5. If the Post is reserved for specific Caste/Category, then please mention your Caste/Category	