

INTEGRATED PATASALAS OF KANCHI KAMAKOTI PEETAM
ACADEMIC YEAR 2025-2026

System of Education

VEDIC PATASALA

Class Applying For : *

Student Information

Have you applied previously? If Yes, Specify when * Yes No

Aadhar Number : *

Birth Date : *

Nakshatram :

Native Place :

Previous School Student Id :

Caste :

Student Name (as in Aadhar Card) : *

Blood Group :

Zodiac Sign :

Vedam :

Sootram :

Student Name (as in Birth Certificate) :

Birth Month :

Mother tongue :

Brothers :

Sisters :

Shaka :

Parents / Guardian Information

Father Guardian 1

Name (As in Aadhar):

Mobile Number:

Email :

Bank Name :

Mother Guardian 2

Name (As in Aadhar):

Mobile Number:

Email :

Aadhar #:

Whatsapp No:

Name (as in Bank Account) :

IFSC :

Aadhar #:

Whatsapp No:

Name (as in Bank Account) :

Occupation:

Account Number :

Occupation:

Account Number :

Bank Name :

IFSC :

Address Information

Present Address (as per Aadhar)

Address Line 1:

Address Line 2:

City:

State:

Pin Code:

Permanent Address (Same as Present Address)

Address Line 1:

Address Line 2:

City:

State:

Pin Code:

Other Information

How did you came to know about the Pathasala?

Any Sibling studying in Pathasala/ If Yes, Mention Name, Class, Branch and Pathasala

Any further information you wish to furnish

Rules & Regulations

I hereby declare that all the entries are correct to the best of my knowledge and belief. As a Parent/Guardian, I shall abide by the rules & regulations of the School. My ward will follow the rules of discipline of the school. I also agree to continue in Pathasala till completion of graduation.

I Agree to the [* Rules and Regulations \(Click here\)](#)

Parent Consent *

Student Consent *