D. A. V. PUBLIC SCHOOL, CANTT.ROAD, KHAGAUL, PATNA PROFORMA POR PARENTY AUTHORIZATION TO ALLOW THESE WARRING TO REPORTALIAVE SCHOOL, CAMPUS SEPORDAPTER SPECIAL ACTIVITIES IN SCHOOL.

Date:

•	school on his own by personal mode of
conveyance/school bus on/from :to	at (time) : after the
conclusion of A	ctivity/ Examination / Practical Examination/
Extra/Doubt Classes.	
Signature of the Parents	Signature of the Student
Name of Mother/ Father :	Name of Student :
Address :	Class Sec : Roll No:
	(Class Teacher's / Supervising Teacher's Signature with Date)

D. A. V. PUBLIC SCHOOL, CANTT.ROAD, KHAGAUL, PATNA

PROPORTIA FOR PARENTE AUTHORIZATION TO ALLOW THEIR WARDS TO REPORTAZAVE ECHOOL GAMPIN SEPOREAPTER SPECIAL ACTIVITIES IN SCHOOL	
	Date:
I, F/ 0	O
CLASS: SECTION: ROLL NO :	ADMISSION No: do
hereby authorize my ward to report/leave the conveyance/school bus on/from :to	at (time) : after the
Extra/Doubt Classes.	
Signature of the Parents	Signature of the Student
Name of Mother/ Father :	Name of Student :
Address :	Class Sec : Roll No:
	(Class Teacher's / Supervising Teacher's Signature with Date)
Latest Mobile/ Phone No :	Name of Teacher: