

Local Guardian Declaration Form

I..... (Name of the student) declare that Mr. /Mrs.to be my local guardian who is my (family friend /relative / family member etc.) residing within 200km of the institute.

The detail of my local guardian are as follows:

Age:..... Relationship with the Student:

Address:.....

Mob. No. 1. Mob. No. 2.

Email Id of Local Guardian

Signature of student.....

Name of the student.....

Roll No.

Mobile No.