

**Application For Willingness for membership : School Level Fee  
committee(SLFC): 2025-26**

To,  
The Director  
MGD Girls' School, Jaipur  
Email- director@mgdschooljaipur.com

Student NIC ID .....

Parent Name .....

Gender Male / Female.....

Parent Education- Illiterate / literate / Upper Primary / Secondary / Senior

Secondary / Graduate / Post Graduate:-.....

Parent Aadhar No.....

Parent Mobile No.....

Parent email id.....

Student Name.....

Admission No ..... Class..... Section.....

Willing is to be part of the **School Level Fee Committee: 2025-26.**

. I have a general understanding of school development and quality education ☐

. I have general knowledge of financial management and accounting. ☐

. I will participate in the decisions taken by the school in the interests of the students. ☐

. My daughter is / is not undergoing free education under Section 12(1)(C) of the RTE Act, 2009 . ☐

. I express my consent to be elected as a SLFC member. ☐

. Please include my name in the lottery draw scheduled on 31<sup>st</sup> August 2025.

Date: .....August 25

Signature of Parent