



Sheth M. N. Science College, Patan.

PARENTS - TEACHERS ASSOCIATION

Date : / / 200

To,
The Principal,
Sheth M. N. Science College,
Patan.

I, the undersigned _____
wish to join as a member of Parents-Teachers Association of your institute. I am
ready to participate activity in every activity of association as well as assure you to
provide any suggetion which are necessary for development of college & students.

Name of Parents :

Address :

Telephone / Mobile No. :

Occupation :

Name of student :

Year : **F.Y. / S.Y. / T.Y.**

Roll No. :

Signature of Parent