



HOLY CONVENT

(SR. SEC. SCHOOL)

(RECOGNIZED & AFFILIATED TO C.B.S.E.)

VIKAS NAGAR, RANHAULLA ROAD,

NEW DELHI-110059

Ph. : 8929743872, 8929743873



Progress Report of Holier

Session : 2024. - 20.25.....



YASHIKA
XI-A

Name YASHIKA

Mother's Name KOMAL

Father's Name TARUN KUMAR

Class XI Section A

Roll No. 27 Admn. No. 3469

Date of Birth 15.07.2008

Address W2-123, OM VIHAR PHASE II

NEW DELHI - 59 Phone/Mobile 7827604177

E-mail ID _____

XI

ACADEMIC SESSION 2024.. - 2025..

SUBJECT	U.T.-I	U.T.-II	Half Yearly		U.T.-III	U.T.-IV	Annual		TOTAL
MAX. MARKS →	25	25	100		25	25	100		300
			Prac.	Theory			Prac.	Theory	
HINDI	20	18	19	48	14	13	18	46	196
ENGLISH	14	09	18	34	Ab	11	17	39	142
MATHS									
PHYSICS									
CHEMISTRY									
BIOLOGY									
ECONOMICS	10	09	17	30	13	Ab	15	15	109
ACCOUNTS	03	08	15	22	13	11	12	19	113
B. STUDIES	13	17	17	46	22	06	18	37	176
HISTORY									
POL. SCIENCE									
INF. PRACTICE									
COMP. SCIENCE									
PHY. EDUCATION	18	18	24	47	21	14	20	37	199
GRAND TOTAL (M.O.)	60	62	266		62	41	236		736
GRAND TOTAL (M.M.)	125	125	500		125	125	500		1500
%age	48	50	53.2		50	33	47		49

CO-SCHOLASTIC AREAS (A, B, C)	GRADE
WORK EDUCATION (OR PRE-VOCATIONAL EDUCATION)	B
ART EDUCATION	B
HEALTH & PHYSICAL EDUCATION	A
GRADE	
DISCIPLINE (A, B, C)	B

CO-SCHOLASTIC AREAS (A, B, C)	GRADE
WORK EDUCATION (OR PRE-VOCATIONAL EDUCATION)	B
ART EDUCATION	B
HEALTH & PHYSICAL EDUCATION	B
GRADE	
DISCIPLINE (A, B, C)	B

ATTENDANCE 114/138 Division 2nd
 CLASS TEACHER'S REMARKS Has shown improvement in grades. Have the potential to grow.

ATTENDANCE 272/356 Division III
 CLASS TEACHER'S REMARKS Congratulations!

Signature of Class Teacher *[Signature]* Signature of Principal *[Signature]* Signature of Parents *[Signature]*

Signature of Class Teacher *[Signature]* Signature of Principal *[Signature]* Signature of Parents *[Signature]*



भारत सरकार

Government of India



Aadhaar no. Issued: 16/06/2018



यशिका

Yashika

जन्म तिथि/DOB: 15/09/2008

महिला/ FEMALE

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।

इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/
ऑफलाइन एक्सएमएल की स्कैनिंग) के साथ किया जाना चाहिए।

Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online
authentication, or scanning of QR code / offline XML).

8182 1466 4726

मेरा आधार, मेरी पहचान



भारत सरकार

Government of India



Issue Date: 13/11/2011



कोमल

Komal

जन्म तिथि/DOB: 11/09/1978

भरिता/ FEMALE

8652 1234 6985

VID : 9180 8073 9422 3588

मेरा **आधार**, मेरी पहचान



फॉर्म संख्या / Form No. 5
राष्ट्रीय राजधानी क्षेत्र, दिल्ली सरकार
Govt. of National Capital Territory of Delhi
दिल्ली नगर निगम
MUNICIPAL CORPORATION OF DELHI
जन्म प्रमाण पत्र / Birth Certificate



0124-114091611

(Issued under section 17 of the Registration of Birth and Death Act, 1969 and 8/13 of Delhi Registration of Birth Rule, 1999)

This is to certify that the following information has been taken from the original record of BIRTH which is the register for Municipal Corporation Of Delhi of WEST ZONE of N.C.T. Delhi

नाम / Name	YASHIKA
लिंग / Gender	FEMALE
जन्म की तिथि / Date Of Birth	15-07-2008
जन्म का स्थान / Place Of Birth	GOUTHAM NURSING HOME DELHI . JEEVAN PARK(UTTAM NAGAR) WEST DELHI INDIA 110059
पंजीकरण की तिथि / Date Of Registration	20-07-2008
पंजीकरण संख्या / Registration No	MCDOLIR-0108-003115896
पुरानी पंजीकरण संख्या / Old Registration No	MCDOLR08188148
माता का नाम / Name of Mother	KOMAL
पिता का नाम / Name of Father	TARUN KUMAR
वर्तमान पता / Present Address	INDIA
स्थायी पता / Permanent Address	INDIA
जारी करने की तिथि / Date of Issue	18-09-2024



Note: This certificate is system generated and does not require any seal/signature in original. The authenticity of this certificate can be verified at mcdonline.mc.in

प्रत्येक जन्म एवं मृत्यु का पंजीकरण सुनिश्चित करे
ENSURE REGISTRATION OF EVERY BIRTH & DEATH



फार्म संख्या/Form No. 6

(नियम संख्या 8 देखिए)/(See Rule-8)

राष्ट्रीय राजधानी क्षेत्र, दिल्ली सरकार

Govt. of National Capital Territory of Delhi

दक्षिणी दिल्ली नगर निगम

South Delhi Municipal Corporation

DEATH

प्रमाण-पत्र / CERTIFICATE



(जन्म एवं मृत्यु पंजीकरण अधिनियम, 1969 की धारा 17 तथा दिल्ली जन्म एवं मृत्यु पंजीकरण नियम, 1999 के नियम 8413 के अन्तर्गत जारी किया गया) (Issued under section 17 of the Registration of Births and Deaths Act, 1969 and Rule 8/13 of the Delhi Registration of Births and Deaths Rules, 1999)

यह प्रमाणित किया जाता है कि निम्नलिखित सूचना के मूल लेक से ली गई है जोकि राष्ट्रीय राजधानी DEATH this is to certify that the following information has been taken from the original record of DEATH which is the दक्षिणी दिल्ली नगर निगम क्षेत्र के रजिस्ट्रार में उल्लिखित है घ

register for South Delhi Municipal Corporation of West Zone Zone of N.C.T of Delhi

नाम/ Name TARUN KUMAR

लिंग/ Gender Male

तिथि/ Date of Death 05/12/2019

स्थान/ Place of Death Sri Balaji Action Medical Institute, Paschim Vihar New Delhi

पंजीकरण की तिथि/ Date of Registration 05/12/2019

पंजीकरण संख्या/ Registration No. MCDOLIR-0219-004979596

Name of Mother -----

Name of Father BALBIR SINGH

Present Address WZ 123, OM VIHAR, PHASE- II, UTTAM NAGAR, NEW DELHI- 110059

Permanent Address WZ 123, OM VIHAR, PHASE- II, UTTAM NAGAR, NEW DELHI- 110059

Date: 10/12/2019

Note: The certificate is system generated and does not required any seal/signature in original, The authenticity of this certificate can be verified @ www.mcdonline.gov.in



Ensure registration of every birth and death