RYAN INTERNATIONAL SCHOOL
KOMPALLY

Circular No: Cir/76/26-27 **Date: 03/07/2026**

Annexure-1
PARENTAL CONSENT FORM FOR APAAR ID GENERATION
(To be filled by the Father/Mother/Legal Guardian)

Name of Student (as per Aadhar): _____Class/Section: _____

DOB:_____School Name: _____

I**, _____** (Parent/Guardian), bearing Identity Proof (Aadhar No.)

_____, am the Natural/Legal Guardian of the student mentioned above. I have been informed about the **Automated Permanent Academic Account Registry (APAAR)** initiative. I understand that **APAAR** is a voluntary facility for maintaining a lifelong digital academic record and accessing **Digi Locker services**.

CONSENT

I voluntarily give my consent to share my ward's Aadhaar Number/Alternate Govt. Issued PIC with the identity proof number **_____,** with the Ministry of Education for the sole purpose of creating an **APAAR ID** and opening a Digi Locker account.

I authorize the Ministry of Education to use the Aadhaar number (if provided above) of my ward for authentication with **UIDAI**. I understand that the Aadhaar number will be masked and kept confidential.

Declaration by Parent/Guardian:

I understand that I can withdraw or modify my consent at any time in the future by submitting a request to the school or by contacting the following email address _____.

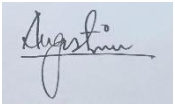
Date: _____ Name of the Father:_____

Place: _____ Name of the Mother:_____

Signature of Father:_____

Signature of Mother:_____

Signature of



(Principal/Head Master)

*EMAIL ID : apaarsupport@ciet.nic.in