



**Shanti Asiatic School, Jaipur**

Plot No.1, Suncity Township,

Sikar Road, Jaipur - 302013

Ph.: 0141-2820088

E-mail: info@jaipur.shantiasiatric.com

**3071**

Date: May 01, 2024

**Parents Teachers Association (PTA) (2024-25)**

**&**

**School Level Fee Committee (SLFC)**

Dear parents

In accordance with the Rajasthan Schools (Regulation of Fee) Act, 2016 and Rules - 2017, the Parents Teachers Association (PTA) 2024-25 has been formed on 12 April 2024 ; for this every parent has to contribute Rs. 50/- per annum.

The school is framing PTA Executive Committee (2024-25) and school level fee committee (session 2025-26). A meeting for the constitution of the members of the PTA Executive Committee and the School Level Fee Committee (SLFC) will be held in due course. Information will be sent to you at the appropriate time about the meeting of the PTA and formation of the SLFC

Those willing to be the part of it are also requested to fill the attached consent form and send to school before May 15, 2023. Five parent members will be elected for school level fee committee by lottery /draw in school premises on due dates.

(Ms. Neeta Andani)

Principal

Distribution

  
**PRINCIPAL**  
**SHANTI ASIATIC SCHOOL**  
**JAIPUR - 302013**  
**Affi. No.: 1730695**

1. School Website
2. Class WhatsApp Groups
3. Student's Diary
4. School Notice Board
5. Classroom Notice Boards

**PARENT TEACHER EXECUTIVE COMMITTEE (2024-25)**

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**SCHOOL LEVEL FEE COMMITTEE**

**CONSENT FORM**

Received circular dated May 1, 2024 with reference to constituting of PTA Executive committee and school level fee committee. I am interested to be a part of these committees. Details of my ward/wards studying in Shanti Asiatic School are as follow:

| <b>S.No.</b> | <b>Name of Student</b> | <b>Father's Name</b> | <b>Mother's Name</b> | <b>class</b> |
|--------------|------------------------|----------------------|----------------------|--------------|
|              |                        |                      |                      |              |
|              |                        |                      |                      |              |
|              |                        |                      |                      |              |

Parents Name and Signature

Date:

Contact No: