

## **Consent Form**

I hereby give my consent to start a chapter of PEACE Foundation at our School /College by the name of PEACE Foundation –Young Chapter

The School /College agrees to abide by the rules, regulations /constitution of PEACE Foundation and the changes made from time to time in future

**Name of the Institution:** \_\_\_\_\_

**Full Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Office no. :** \_\_\_\_\_ **Fax no.:** \_\_\_\_\_

**Email id:** \_\_\_\_\_

**Name of the Principal:**\_\_\_\_\_

**Tel no - Office no. :** \_\_\_\_\_ **Resi. No. :** \_\_\_\_\_

**Cell no. :** \_\_\_\_\_ **Email id:**\_\_\_\_\_

**Type of school:** Government / Private \_\_\_\_\_

**Board:** STATE / CBSE / ICSE / Any other \_\_\_\_\_

**Total no. of students in school:** \_\_\_\_\_



**Name of Teacher coordinators:**

**1.** \_\_\_\_\_

**2.** \_\_\_\_\_

Tel. no.: Office no. : \_\_\_\_\_ Resi. no. : \_\_\_\_\_

Cell no. : \_\_\_\_\_ Email id: \_\_\_\_\_

PEACE Coordinator

**Ms. Vaishali Magar**  
Cell : 9370166065

**Signature of Principal**  
**with Stamp**