

LAKSHMIPAT SINGHANIA ACADEMY

APPLICATION FOR RESET PASSWORD FOR SCHOOL ERP (Isacampuscare.in)

Session: 2025-26

Student Name : _____

Admission No. : _____

Class : _____ Sec : _____

Existing User ID : _____

Sibling Student Admission No. (If Applicable) : _____

Contact No. : _____

Registered Email-ID with School : _____

Signature of Father

Signature of Mother

FOR OFFICE USE

S.No. _____ :

Password Reset Date : _____

Signature : _____

Charges Received



Rs. 200/- For Password Reset

MR No. _____ dt. _____