**DECLARATION**

I assure that I shall always abide by the rules and regulation of the school. I further promise that I shall regularly attend special classes and special tests conducted in the school, shall wear school uniform regularly, shall participate in all the co- curricular activities whole heartedly and that I shall work in such a way as to sustain the reputation of the school.

**Signature of the pupil**

I declare that I shall keep

Up the above said promises.

**Signature of the Parent / Guardian**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Details of Brother / Sister studying

or studied in this school

(Specify Name, Standard and Year) : a)

b)

References

(Mention any Two references

Countersigned by them) : a)

b)

- -- - - - - - - - - - - - - - -- - - - - - - - -- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -

**ORDERS OF THE PRINICPAL**

Admit in group\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Verified

1. T.C
2. Mark statement
3. Community certificate ( Xerox Copy)
4. Aadhaar card ( Xerox Copy)
5. Ration card ( Xerox copy)

**Signature of the Principal**

**With date**

Admission No Date of Admission Application No Std & Group

**APPLICATION FOR ADMISSION**

**TO XI Std**

**Alagappa Girls Matriculation Higher Secondary school**

**ALAGAPPAPURAM, KARAIKUDI - 630 003. Sivaganga District.**

**HIGHER SECONDARY COURSE**

***Note: Application defective in particulars or in any other manner will not be considered.***

|  |  |  |
| --- | --- | --- |
| 1. Name of the Applicant in full as given in the school leaving Certificate/ Transfer Certificate (BLOCK LETTERS) | ENGLISH : |  |
| TAMIL : |
| 1. Date of Birth | | Age |
| 1. Sex | |  |
| 1. Nationality | |  |
| 1. State to which the pupil belongs | |  |
| 6. Native place | | Village /Town  Taluk  District |
| 7. Religion and Caste (Intended only for Statistical  Purposes) | |  |
| 8. Does the candidate belong to Scheduled caste or Scheduled tribe or other socially backward classes specified in the T.E.R or is he a convert from the Scheduled caste or the Scheduled tribe? If so, Please specify | |  |
| 9. a) Whether living with parent or Guardian  b) Local Residential Address if not living with  Parent or Guardian. | |  |
| 10. Aadhaar No | |  |
| 11). a)Name of Father  b)Occupation  c)Address    d)Phone No  e)Annual Income | | Office ………… Res……… Mobile ……………. |
| 12. a)Name of mother  b)Occupation  c)Address  d)Mobile no  e)Annual Income | |  |
| 13. Qualifying examination passed | |  |

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14. Marks obtained in the Tenth standard Examination :

(Marks obtained in the qualifying examination are to be attested by the Headmaster of a recognized school

or by any gazetted officer.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of the Examination | Month and year of appearance and Reg.No | Subjects | Maximum marks  Prescribed | Marks obtained | |
| State board/  Matriculation /  C.B.S.E / Anglo Indian |  | Tamil  English  Mathematics  Science  History&  Geography |  |  |
|  |  | Total |  |  | |

Signature of the Attesting officer with Designation and seal

(Only attested copies of the Mark sheets and not original should be attached to the Application form. The original should be produced at the time of admission)

|  |  |
| --- | --- |
| 15. Class last studied & Name of School last attended  and reasons for leaving, if discontinued. |  |
| 16. EMIS No |  |
| 17. Whether a copy of the Transfer Certificate is attached? ( Original to be Produced at the time of admission) |  |
| 18. State whether admission is sought for the first year or Second Year of the course |  |
| 19. Mother – Tongue of pupil |  |
| 20. Medium in which the pupil studied at the time of leaving the school |  |
| 21. From the subjects offered in the School indicate in the space provided below your choice of subjects. | |
| PART I Name of the Language | TAMIL/ HINDI/ SANSKRIT |
| PART II Name of the Language | ENGLISH ( Compulsory for all) |

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General Educational Group

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | First  Subject | Second  Subject | Third  Subject | Fourth  Subject |
| 1.  2. |  |  |  |  |

22. Identification Marks

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.

2.

|  |  |
| --- | --- |
| 23. whether protected from small pox?  (Vaccinated or small pox marked) |  |
| 24. Proficiency in Extra –curricular activities  (Attested copies of the certificate to be  attached) |  |
| 25. Full postal address of the applicant for  Communication  ( IN BLOCK LETTERS) |  |
| 26.Family Details |  |
| a) Ration card No |  |
| b) Bank Name |  |
| c) Name of the A/c holder |  |
| d) IFSC code |  |
| E) A/c No |  |

I declare that the particulars given above are correct to the best of my knowledge and that I will abide

by the rules of the school

I am aware that admission obtained on false information or by suppression of facts will be cancelled

On detection at any time

Signature of the Applicant

**Station :**

**Date** **:**

Signature or Thumb impression

of the Parent or Guardian.