

**MOUNT CARMEL HOSTEL,  
# 3746, SECTOR 46-C, CHANDIGARH..**

We welcome your ward to Mount Carmel School, Chandigarh. Now we jointly share the responsibility of grooming him/her into a confident, responsible and good human being through a journey that is enriching, rewarding and challenging for a bright future. Please share the information, which will help us to know your child better. This might include specific information about learning differences, health issues, gifted programmes, accelerated learning, tutoring and family circumstances etc.

**REGISTRATION FORM**

Name of the Student: \_\_\_\_\_

Class : \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Mother tongue: \_\_\_\_\_ Religion: \_\_\_\_\_

Passport size  
photograph of  
your ward

Meal preferences, Tick (if appropriate): Veg: \_\_\_\_\_ Non-Veg. (only Eggs): \_\_\_\_\_ Non-Veg.: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

Qualification: \_\_\_\_\_

Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

Qualification: \_\_\_\_\_

Occupation: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Tel. No.: \_\_\_\_\_ Fax. No. \_\_\_\_\_ E-mail: \_\_\_\_\_

Correspondence Address: \_\_\_\_\_

Tel. No.: \_\_\_\_\_ Fax. No. \_\_\_\_\_ E-mail: \_\_\_\_\_

Whether Scheduled Caste / Tribe: Yes ☐ No ☐

Student lives with: (Please Tick)

Both Parents

Mother

Father

Shared Custody

Guardian

If staying with single parent / guardian, reason:

Parents separated

Parents divorced

Father deceased

Mother deceased

Any real brother / sister already in this School.

	<b>Name of the child</b>	<b>Admission No. / ID No.</b>	<b>Class &amp; Section</b>
1.	_____	_____	_____
2.	_____	_____	_____

Name and Address of the Last School Attended: \_\_\_\_\_

Type of School: Day ☐ Day Boarding ☐ Residential ☐ Day/Residential ☐

School Affiliated to (the board):

CBSE \_\_\_\_\_ State Board (please specify the State) \_\_\_\_\_

ICSE \_\_\_\_\_ Any Other \_\_\_\_\_

Last Class Attended: \_\_\_\_\_ Promoted: Yes ☐ No ☐

Marks Obtained / Total marks: \_\_\_\_\_ Percentage: \_\_\_\_\_ Position: \_\_\_\_\_

Has your ward skipped or repeated a grade? If so, indicate the grade and the circumstances.

Hobby / Activities / Sport (if any) in previous School:

Participation in Games / Sports:

Name	Level
_____	_____
_____	_____

Participation in other Co-curricular:

Name	Level
_____	_____
_____	_____

Briefly describe any Academic / Learning difficulties your ward has experienced in School:

What, if any, major stresses have occurred in the family within the past year?

Does your ward interact well with peers?

What educational support is your ward currently receiving (i.e. tutoring, speech or language etc.)?

What would you most like your ward to gain while at Mount Carmel School, Chandigarh.

How does your ward feel about attending this School?

The academic program at this School attempts to develop your ward intellectually, socially, physically, emotionally and spiritually. What are your ward's strengths in these areas?

How did you hear about this School?

What are the two greatest factors in your choice of Mount Carmel School, Chandigarh for your ward?

Academics ☐ Co-curricular Activities ☐ Facilities ☐ Any other \_\_\_\_\_

In conclusion, please share any other information you feel we may have missed in asking about your ward.

Please sign this form below and return to the School office.

Date: \_\_\_\_\_

Signature

**MOUNT CARMEL HOSTEL,  
# 3746, SECTOR 46-C, CHANDIGARH.  
PHYSICAL EXAMINATION & MEDICATION**  
(This proforma is to be filled in only by your Physician)

Name of the Student: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Class \_\_\_\_\_ Section: \_\_\_\_\_ ID No. \_\_\_\_\_  
Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Weight (in Kgs.): \_\_\_\_\_ Height (in Cms.): \_\_\_\_\_  
Blood Group: \_\_\_\_\_ Haemoglobin: \_\_\_\_\_

Immunization details:

Diseases	Vaccinated	Non Vaccinated	Vaccination Req.
Hepatitis – A	_____	_____	_____
Hepatitis – B	_____	_____	_____
Typhoid	_____	_____	_____
Chicken Pox	_____	_____	_____
Meningitis	_____	_____	_____

List of prescription / medications which the child is currently taking or has taken in the past years.

Ailment	Medication	Dose	Frequency
_____	_____	_____	_____
_____	_____	_____	_____

Please write 'N' for Normal and 'A' for Abnormal:

Head: \_\_\_\_\_ Ears: \_\_\_\_\_ Nose : \_\_\_\_\_ Eyes: \_\_\_\_\_ Skin: \_\_\_\_\_  
Neck: \_\_\_\_\_ Feet: \_\_\_\_\_ Chest: \_\_\_\_\_ Teeth: \_\_\_\_\_ Throat: \_\_\_\_\_  
Spine: \_\_\_\_\_ Joint: \_\_\_\_\_ General Hygiene: \_\_\_\_\_ Others: \_\_\_\_\_

General Observations:

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

Certified that Master / Miss: \_\_\_\_\_  
Is medically fit and may be admitted as a Boarder.

Date: \_\_\_\_\_

Sign. of Medical Officer  
(with Stamp)

**MOUNT CARMEL HOSTEL,  
# 3746, SECTOR 46-C, CHANDIGARH.**

**PRELIMINARY – HEALTH PROFORMA**

(This proforma is to be filled in only by THE PARENTS)

Name of the Student: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Class \_\_\_\_\_ Section: \_\_\_\_\_ ID No. \_\_\_\_\_  
Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Family Medical History (if any): \_\_\_\_\_  
\_\_\_\_\_

Allergies (related to medication, environment, food or insects). If any other, please specify  
\_\_\_\_\_  
\_\_\_\_\_

Please list any sickness / injury of your child which have required long medical treatment:  
\_\_\_\_\_  
\_\_\_\_\_

Has your child's physical activity been restricted at any time in the last three years?  
\_\_\_\_\_

Has your child ever received any medication, treatment or counselling for any emotional disturbance, behaviour, psychiatric conditions? Yes ☐ No ☐ If yes, please attach the prescription for the same.  
\_\_\_\_\_

Has your child ever been treated for any neurological disease? Yes ☐ No ☐ If yes, please explain.  
\_\_\_\_\_

Does your child have any speech disorder such as stammering, listening etc.?  
\_\_\_\_\_

Does your child wear spectacles? Yes ☐ No ☐ If yes, then write the eye sight number:- \_\_\_\_\_  
\_\_\_\_\_

Does your child have proper bladder / bowel control?  
\_\_\_\_\_

**Deworming Status:**

Course taken: \_\_\_\_\_ Note taken \_\_\_\_\_

Any other information regarding the health of your child: \_\_\_\_\_  
\_\_\_\_\_

I declare that my child is medically fit and nothing has been concealed regarding his / her fitness. In case it is found that my child is not medically fit as per decision of the Medical Authority appointed by Mount Carmel School, Chandigarh, I shall withdraw my child from the School / Hostel.

I further undertake that I shall not claim for any refund of fees and any other dues or charges from the School / Hostel for the same.

Date: \_\_\_\_\_

**Parent's Signature**

**MOUNT CARMEL HOSTEL,  
# 3746, SECTOR 46-C, CHANDIGARH.  
REQUIREMENT LIST FOR BOARDING STUDENTS**

**Items provided by the School**

Each child will be provided with a Bed, Mattress, Bed cover, Cupboard with 2 Big Shelves, a drawer and shoe rack.

**List of Items to be brought by the students for personal use**

**For the School** \_\_\_\_\_

**School Uniform: As per school Prospectus.**

- |                           |   |
|---------------------------|---|
| * 4 pairs Regular Uniform | * 6 Dark Brown Patkas (for Sikh Boys)               |
| * 2 pairs Sports Dress    | * 4 Dark Brown School Ribbon (for Girls) – 4 Metres |
| * 1 School Bag            | * 1 Small Synthesizer (Casio / Yamaha) or Guitar    |
| * 1 Water Bottle          | * Stationery Items for School / Hostel use.         |

**After School Hours** \_\_\_\_\_

**Under Linen:**

- |  |  |
|--|--|
| * 6 White/Coloured Under pants   | * Cap + Sunglasses (1 each)                                      |
| * 2 White/Coloured   | * 1 Wrist Watch  |
| * 2 Woollen Long-johns   | * 1 Leather Belt   |
| * 2 Woollen Vests  | * 6 Handkerchiefs  |
| * 1 Suitcase / Handbag   | * 6 pairs of Casual Socks  |
| * 6 Sets of casual dresses (including casual patkas for Sikh students) | * 1 Set Smart Wear (For Formal Occasions Including Shoes)        |
| * 6 pairs of Underwears & Vests (Cotton)                               | * 1 Lightweight Waterproof Jacket with hood / Raincoat with Cap. |
| * 1 pair of bath slippers  | * 1 Pair Open Sandals.   |
| * 1 pair Casual Sports Shoes/Trainers (White based)                    | * Skates with kneepads / elbow guards                            |
| * 1 Bathroom Gown  | * Football shoes (Boys Only – optional for Girls)                |
| * 3 pairs of Night Suits   |  |

**For the Boarding** \_\_\_\_\_

- |                              |  |
|------------------------------|--|
| * 4 (One White) Bed Sheets   | * 1 Hairbrush or Comb  |
| * 4 (One White) Pillow cases | * 1 Torch  |
| * 1 Quilt                    | * 6 Hangers  |
| * 1 Blanket                  | * Small Backpack with lock   |
| * 1 Pillow                   | * Address Book, Writing Materials, Diary   |
| * 1 Nail Cutter              | * Inland Letters   |
| * 1 Umbrella                 | * 2 Pairs Spectacles (if required)   |
| * 1 Black Shoe Polish        | * Dozen Spare Name Tags to be handed to the Matron (Please see back for details)   |
| * 1 Shoe Brush               | * Toiletries: 2 Bath Towels (Approx. 24" x 48", preferably with Loop), 6 Soaps,  |
| * Spare Shoe Laces           | Soapcase, Shampoo, Conditioner, 2 Toothbrushes, Toothpaste, Mug, 2 Hand Towels, Shower cap, Hair Oil, Talcum Powder, Sunscreen/Cold Cream. |

**Winter Items (From Autumn Break)** \_\_\_\_\_

- |   |                            |
|---|----------------------------|
| * 1 Heavy All-Purpose Outer Coat / Jacket | * 3 Woollen Thermal Inners |
| * 2 Jackets                               | * 1 Sweatshirt             |
| * 2 Pullovers full sleeves                | * 1 Muffler                |
| * 2 Pairs Winter Gloves                   | * 2 Pairs Woollen Socks    |
| * 2 Winter Woollen Caps                   |                            |

**Sports Items / Indoor Games** \_\_\_\_\_

Although the School will have all the basic common sports material the students may bring the items as per his or her preference for the various sports/games (e.g. Tennis Rackets, Table Tennis Rackets, Badminton Rackets, Cricket Kit, Roller Hockey Stick, Ludo, Indoor games etc.)

**Note:**

- Hostlers must bring only befitting and decent clothes.
- Ill fitting, short sized, torn, damaged or worn out clothes will not be accepted.

### **Labelling of Items**

All belongings of the child should be duly labelled with his/her name to avoid mix-up. All linen and clothing must be marked with half inch embroidered name tapes (white base with dark brown thread)- sewn in, not ironed. Non clothing items should be labelled with permanent non washable marker pens in places where they do not spoil the item. The suggested method of marking clothes etc. is as follows:

- Towels- one corner of hem – large name tapes.
- Handkerchiefs – one corner.
- Shirts / Pajama / Jackets – back of neck, visible fold.
- Trousers (Pajama & Pants) – inside centre back of waistline.
- Socks – inside in the perpendicular position, with the number end of tape at the top of the socks.
- Shoes, boots, sandals and slippers to be marked with your child's name tape or black marker. The tongue is an ideal area for this.

First and last names, with middle initial if any, should be printed in full on tapes which should withstand repeated washing in high-temperature laundry water.

### **List of items that may be Provided by the School on Payment**

School Uniform may be provided by the School for summers and winters. Additional clothes such as House T-shirts / Shorts etc. if and when required by the children for any school activity, will be provided by the School.

School Uniform (Summers & Winters ): As per the School Diary / Prospectus

### **List of Prohibited Articles and Substances**

- |  |   |
|--|---|
| * Cash   | * Chewing Gums                          |
| * Electric / Electronics Equipment / Gadgets                   | * Fireworks                             |
| * Mobile Phones  | * Holi Colours + Fireworks              |
| * Walkman / I – pods / MP3 Players                             | * Alcoholic beverages                   |
| * Expensive items e.g. jewellery, expensive watches etc.       | * Cigarettes / Tobacco / Match Sticks   |
| * Sharp Objects like scissors, needles, knives, cutters, pins. | * Drugs                                 |
| * Toy or replica guns  | * Hair gels                             |
| * Video Games  | * Deodorants                            |
| * Cameras  | * Perfumes                              |
| * Pets   | * Playing Cards                         |
|  | * Audio + Video CDs/DVDs                |
|  | * Any kind of Arms / explosive material |

**MOUNT CARMEL HOSTEL,  
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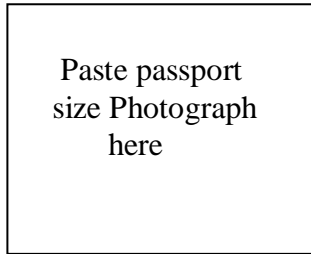
**APPOINTMENT OF LOCAL GUARDIANS**  
(This proforma is to be filled in only by the parents)

Name of the Student: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

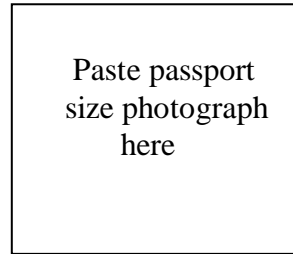
Class: \_\_\_\_\_ Section: \_\_\_\_\_ ID No. \_\_\_\_\_

Hostel: \_\_\_\_\_



Father

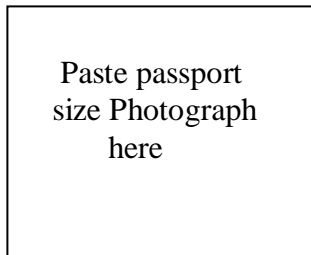
Signature: \_\_\_\_\_



Mother

Signature: \_\_\_\_\_

I hereby appoint the following two guardians who are my relatives / friends:



Guardian 1

Guardian's Name: \_\_\_\_\_

Relation: \_\_\_\_\_

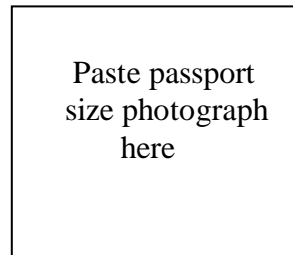
Occupation: \_\_\_\_\_

Address: \_\_\_\_\_

Tel. No. \_\_\_\_\_

Mobile: \_\_\_\_\_

Guardian's Signature: \_\_\_\_\_



Guardian 2

Guardian's Name: \_\_\_\_\_

Relation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Address: \_\_\_\_\_

Tel. No.: \_\_\_\_\_

Mobile : \_\_\_\_\_

Guardian's Signature: \_\_\_\_\_

- I authorize on my behalf the above mentioned guardians to take my child during vacations / leave / weekend as per instructions of the School Principal / Management.
- They shall be responsible for the child in every respect while he/she is outside the School.

I do hereby declare that the above mentioned contents are true to the best of my knowledge and belief and nothing has been concealed by me. I will abide by the School Rules.

Date: \_\_\_\_\_.

**Parent's Signature**

**MOUNT CARMEL HOSTEL,  
# 3746, SECTOR 46-C, CHANDIGARH.**

**CHECK LIST (HOSTEL STUDENTS)**

Name of the Student: \_\_\_\_\_  
Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_  
Class: \_\_\_\_\_ Section: \_\_\_\_\_ Admission No.: \_\_\_\_\_

**STAGE 1: Fees and other Charges (School & Hostel):**

- |   |  |
|---|--|
| <input type="checkbox"/> Admission Fee  | <input type="checkbox"/> Development Charges |
| <input type="checkbox"/> Security       | <input type="checkbox"/> Annual Charges      |
| <input type="checkbox"/> Quarterly Fees | <input type="checkbox"/> Imprest A/c.        |

Remarks by the Accountant: \_\_\_\_\_

Signature of the Accountant: \_\_\_\_\_

**STAGE 2: Checking of Documents (School File):**

- |  |   |
|--|---|
| <input type="checkbox"/> Birth Certificate | <input type="checkbox"/> Transfer Certificate                 |
| <input type="checkbox"/> Report Card       | <input type="checkbox"/> PP Photo _____ Nos.                  |
| <input type="checkbox"/> NRI's Certificate | <input type="checkbox"/> Divorce / Separation Papers (if any) |

Remarks by the School Office: \_\_\_\_\_

Signature of Staff on Duty

**STAGE 3: Submission of Medical Form**

- |  |   |
|--|---|
| <input type="checkbox"/> Preliminary Health Proforma | <input type="checkbox"/> Medical Health Certificate |
|--|---|

Remarks by the Doctor.: \_\_\_\_\_

Signature of the Doctor

**STAGE 4: Submission of Hostel Performa:**

- |  |  |
|--|--|
| <input type="checkbox"/> Registration Form | <input type="checkbox"/> Local Guardian Form |
|--|--|

Remarks by the Hostel Manager: \_\_\_\_\_

Signature of the Hostel Manager

**STAGE 5: Kit Check (As per the Kit Register) [ Use extra sheet if the kit items are less ]:**

Remarks of Warden / Matron \_\_\_\_\_

Signature: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

**STAGE 6: Student escorted to the Hostel Dorms**

**\* Parents are not allowed to go to the Hostel for any reason.**

**For any query/information/suggestion email at: [mc.hostel@hotmail.com](mailto:mc.hostel@hotmail.com)**

**The form after completion can also be submitted at email address [mc.hostel@hotmail.com](mailto:mc.hostel@hotmail.com)**



