

SCHOOL ADMISSION FORM

Passport Size Photo

Admission No.: _____

Date of Admission: _____

Class in which admission is sought: _____

(To be filled by Parents / Guardian)

Student Details

Full Name of Student:	_____
Date of Birth:	_____
Gender:	_____
Nationality:	_____
Religion:	_____
Category (SC/ST/OBC/Gen):	_____

Parents / Guardian Details

Father's Name:	_____
Occupation:	_____
Mother's Name:	_____
Occupation:	_____
Guardian's Name (if any):	_____
Occupation:	_____
Contact Number:	_____
Email ID:	_____

Address Details

Permanent Address:	_____	_____	_____
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Correspondence Address:	_____	_____	_____
City:	_____	State:	_____
Pin Code:	_____	Country:	_____

Declaration

I hereby declare that the above information provided is true and correct to the best of my knowledge. I shall abide by the rules and regulations of the school.

Signature of Father: _____

Signature of Mother: _____

Signature of Guardian: _____

Signature of Student: _____

For Office Use Only

Admission Granted in Class:	_____
Admission In-Charge Signature:	_____