S.P.MEMORIAL PUBLIC SCHOOL

AT+PO-RUPHARA, PAKRIDAYAL ROAD, DHAKA EAST CHAMPARAN, BIHAR
E-mail-spmps.ruphara@gmail.com, Website-www.spmpsruphara.in
Contact No.-7257086635, 9801606015

ADMISSION FORM

| Admission in classAdm | nission NoDate | |
|-----------------------------------|--------------------------|-------|
| 1.Name | | |
| 2.Mother's Name | | |
| 3.Father's Name | | Photo |
| 4.Guardian's Name | | |
| 5.Date of Birth (in figure) | | |
| (in words) | | |
| 6. Permanent Address | | |
| | | ••••• |
| 7.Local Address | | |
| | | |
| 8.Occupation :- Father | | |
| | | |
| 9.Annual Income:- Father | | |
| Mother | | |
| 10Educational Qualification:- Fat | her | |
| Mo | other | |
| 11.Religion | | |
| 12. Nationality | | |
| 13. Cast | | |
| 14.Aadhar no | | |
| 15.Contact No | | |
| 16.E-mail | | |
| 17.Is single child? Yes/No | | |
| 18.Identification Mark | | |
| 19.School last read | | |
| 20.Class last read | | |
| 21.Name & Class of another ward | who reads in this school | |
| Principal's Remarks | | |
| | | |