

APPLICATION FOR SCHOOL ADMISSION

Name of School Kadachira High School, Kadachira.

1. Name of pupil (initials to be given at the end): (in English and Malayalam)	2. <input type="checkbox"/> Male <input type="checkbox"/> Female			
3. Name of Father (in English and Malayalam)				
4. Name of parent or guardian and his relation to the pupil:				
5. Name of Mother (in English and Malayalam)				
6. Occupation and address of parent or guardian: (House Name, Street/Place name, Post Office, Pin code)	Pin <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
7. Name of Panchayath, Block Panchayath, Taluk, District				
8. Phone Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
9. APL/ BPL (If BPL attach copy of BPL certificate or Ration card)				
10. Aadhaar Number/ Enrolment Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
11. Two Identification Marks	1. 2.			
12. Place of Birth				
13. Whether CWSN (if Yes Specify category)				
14. Name and address and occupation of local guardian in case the pupil does not live with his/her responsible guardian:				
15. Schools previously attended	Duration	Class	Date of Admission	Date of Leaving
16 (a) Date of birth (in figures and words):	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
(b) Whether certified extract from register of Births/ declaration from the parent or guardian/ certificate from the Registered Medical Practitioner has been produced (vide Rule VI-1(1))				

17. Age on date of applications (in words number of years and completed months should be given);	
18. Caste & Religion	
19. Does the candidate belong to the Scheduled castes or Scheduled Tribes or other Backward Communities or is he a convert from Scheduled Castes or Scheduled Tribes?	
20. Nationality and State to which the pupil belongs;	
21. Standard to which admission is sought (in words)	<input type="checkbox"/> V <input type="checkbox"/> VI <input type="checkbox"/> VII <input type="checkbox"/> VIII <input type="checkbox"/> IX <input type="checkbox"/> X
22. (a) Mother tongue of the pupil;	<input type="checkbox"/> Malayalam <input type="checkbox"/> Others (Specify)
(b) The language in which the pupil desires to be instructed];	<input type="checkbox"/> Malayalam <input type="checkbox"/> Englsih
23. First Language	<input type="checkbox"/> Malayalam <input type="checkbox"/> Arabic(A) <input type="checkbox"/> Sanskrit (A) <input type="checkbox"/> Urdu <input type="checkbox"/> Others(Specify)
24. No. and date of transfer certificate produced on admission;	
25. (a) Date of last vaccination:	
(b) Whether immunised from Tetanus, Diphtheria, Measles Polio and B. C. G. (give details)];	

Documents submitted : Transfer Certificate Birth Certificate Copy of Birth Certificate
Copy of Aadhaar Card /Enrolment form Copy of Ration card/BPL certificate
Medical certificate (for CWSN students)

DECLARATION

I have read the rules of discipline of this School and undertake that my ward will abide by them. I solemnly declare that the above particulars about are true and correct. The date of birth declared is correct and true and No Request will be made for change of date of birth

Station :

Signature of Parent or
responsible guardian

Date :

To be filled in by the Headmaster

Date of admission

Admission No

Standard to which admitted

Signature of Headmaster