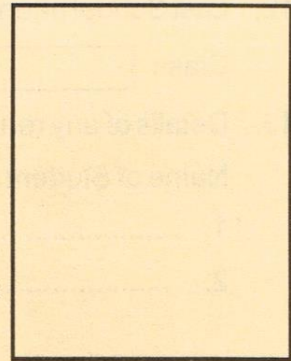




MAHARANI CONVENT SCHOOL

Admission Form



S. Register No.

Date

I the Father / Mother (Name) request you to admit my son/ daughter/ ward in your school.

1. Admission sought to : Class

2. Student's Name :

Sur Name

First Name

3. Date of Birth :

4. Sex:

Male

Female

(in figures) D D M M Y Y Y Y

(in words)

5. Age as on 1st April : Years Months Days 6. Nationality

Parents Information

7. Father's Name Occupation

Designation Qualification Annual Income (Rs.)

Office Address

Mobile No. Phone (R) Phone (O)

8. Mother's Name Occupation

Designation Qualification Annual Income (Rs.)

Mobile No. STD Code Phone (O)

9. Local Guardian's Name

Relation with student

10. Present Address

Contact No.

11. Permanent Address

Contact No.

12. Last School attended by the Student

Class

City

13. Details of any real brother or sister studying in MCS :

Name of Student

Class

1.

2.

Health Information

Allergy if any Blood Group

Any other problem regarding health

Undertaking

- (1) We parents of class hereby Certify that the above information regarding the student is true to our best knowledge.
- (2) That the school dues will be paid in time.
- (3) We shall abide by the rules and regulations of the school.

Parents Signature

Date

Place

Admission Order

The student is granted admission to class provisionally for session

- Enclosed -
- 1. Transfer Certificate of the last School
 - 2. Date of Birth Certificate
 - 3. Report Card of the last School.
 - 4. Two Passport size photographs.

Date :

Principal