

ST. JOSEPH'S CBSE SCHOOL

K H A M M A M ADMISSION FORM

1. Admission Number _____ Sex _____
2. Name of the Pupil _____
3. Mother Tongue _____
4. Surname _____
5. Date of Birth (in figures & words) _____
6. Name of the Parent _____
7. Name of the Guardian _____
8. Residence Address _____
Phone No. _____ (R) _____ (O) _____ (Sh) _____
9. Occupation of the Parent of Guardian _____
10. Religion / Caste _____
11. If belonging to backward Class or scheduled caste, scheduled tribes or a convert to christianity from others, specific community to which he belongs should be given. _____
12. Whether protected from small pox or not. 1. _____
2. _____
13. Schools previously attended by the pupil with classes and years of study _____
14. Whether record sheet or transfer certificate Produced _____
15. I Certify that the information given above is correct, that the pupil has not attended any other school besides these mentioned above, and that no fees are due on his account to any school which he has attended I hold myself responsible for the regular attendance for the pupil and I am liable for the penalty for his defaults. _____
16. Marks of identification.
1. _____
2. _____

Signature of the Parent or
Guardian

To be filled up by the Principal

1. Class on admission _____
2. Date of admission _____
3. Initials of the Principal.

