Application No:

ST.MARY'S PUBLIC SCHOOL



Kuruppampady,Kerala-683545 Ph:0484-2659896,9447678755

Affix recent passport-size colour photograph

APPLICATION FORM																		
	(To be filled in by BLOCK LETTERS)																	
SECTION - A																		
Name of the Pupil																		
Date of Birth (a) in words																		
(b) in figures]								
Age	Years Sex Male Female																	
Aadhar No:																		
Religion																		
Blood Group																		
Caste/Community																		
Nationality																		
State & Place of birth																		
Mother Tongue																		
Class in which admission is sought																		
Class in which Last Attended																		
Name and Address of the School																		
last attended																		
Name of the Board last studied																		
Registration No. of last Examination																		
Transfer Certificate No:																		

Whether submitting Migration Certificate No Yes **Migration Certificate No:** Whether conveyance facilities required Yes No If yes, mention route & point SECTION - B Name of Father **Educational Qualification** Occupation **Office Address** PIN Phone Mobile Email Name of Mother **Educational Qualification** Occupation **Office Address** PIN Phone Mobile Email **Residential Address of the** Applicant PIN **Res:Phone**

				S	ECT	ION	- C														
Name of Guardian*																					
Relationship to the Parent																					
Dcuupation																					
Office Address																					
														P	IN						
Phone]																
Mobile]										
E-mail	Γ																	Γ		Γ	Γ
* IF PARENTS ARE OUT OF STATION		-			-	-		-	-	-		-	-			-	-	-	-	_	_

	Group A :	English, Mathematics, Physics, Chemistry, Computer Science.
	Group B :	English, Mathematics, Physics, Chemistry, Biology.
	Group C :	English, Physics, Chemistry, Biology, Informatics Practice.
	Group D :	English, Economics, Business Studies, Accountancy, Mathematics.
	Group E :	English, Economics, Business Studies, Accountancy, Informatics Practice.

Declaration

IPARENT / GUARDIAN ofdo declare that the particulars entered in this form are true to the best of my knowledge

Place:

Date:

Signature of Parent/Guardian:

	FOR OFFICE USE ONLY	
Admission No.		Date:
Standard to which admitted		Signature of Principal