JAWAHAR PUBLIC SENIOR SECONDARY SCHOOL

EDAVA P.O, VARKALA, TVM - 695 311

APPLICATION FOR ADMISSION

(20…… - 20……)

Photo

Admission No:

1. Student's Name in Full *(In Block Letters), Leave one space between Names and Initials*

2. Date of Birth (In Figure) : Date [ ][ ] Month [ ][ ] Year [ ][ ][ ][ ]
3. Age as on 01 June, 20…. [ ] Gender [B] [G]
4. Class to which admission is sought (In words & figures)_____
5. Nationality : _____ Mother tongue :_____
6. Religion: _____ Caste: _____ SC/ST or OBC [ ]
7. Blood Group _____ Height_____ Weight _____
8. Disabled : [Y] [N] Type of Disability : _____
9. Identification Marks_____

PARENTAL INFORMATION

1. Father's Name Mr. _____

   Academic Qualification: _____

   Occupation: _____ Designation: _____

   Office Phone: _____ Mob: _____

2. Mother's Name Mrs. _____

   Academic Qualification: _____

   Occupation: _____Designation: _____

   Office Phone: _____ Mob: _____

3. Residential Address: _____

   _____

   Pin: _____Phone:_____ _____

4. Guardian's Name :_____Mob:_____
5. Name, Class and Div. of own Brother/Sister if studying in Jawahar :_____

Date of Interview shall be intimated over phone

(Please attach attested copy of the Birth Certificate)

DECLARATION

I,.....father/mother/guardian of …….....

do hereby declare that the particulars given above are true and correct to the best of my knowledge and belief.

Place :.....

Date :..... Signature of parent/guardian