



ST. CLARET SCHOOL (CBSE)

(Affiliated to CBSE, Delhi, No. 3630262)
Charigaon Road, SIRPUR-KAGHAZNAGAR-504 296
Dist. Kumuram Bheem Asifabad (T.S.)

APPLICATION FORM

Admission Date _____

Admission No. _____

Admission required for :

Affix one Passport
Size Photograph
here

Note : Please use Capital letters only

We, _____ and _____ wish

to admit our son/daughter/ward whose particulars are given below as a day scholar at St. Claret School

A. INFORMATION OF THE CHILD

First Name

Middle Name

Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Gender

Date of Birth

Date of Birth in words

<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Blood Group

Religion

Caste

Sub-Caste

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Community SC/ST ☐

OBC ☐

GEN ☐

Others ☐

Aadhar No.

Mother Tongue

Language Known

<input type="text"/>	<input type="text"/>
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RESIDENTIAL ADDRESS

CORRESPONDENT ADDRESS

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Father's Mobile No. _____

Mother's Mobile No. _____

Preferred Phone No. for School SMS

<input type="text"/>

How do you propose to send your child to School : School Bus ☐ Own ☐ Distance from School (in Kms.)

Emergency Contact No. (Res./Mobile)	Name of the person to be contacted	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>

FAMILY INFORMATION**Father / Guardian :**

Name _____ Age _____ Nationality _____

Educational Qualification _____

Occupation _____ Designation _____

Annual Income _____ Tel. : _____

Office Address _____

Aadhar No. _____

Mother / Guardian :

Name _____ Age _____ Nationality _____

Educational Qualification _____

Occupation _____ Designation _____

Annual Income _____ Tel. : _____

Office Address _____

Aadhar No. _____

Single Parent,

Tick one, only if applicable

FATHER	MOTHER
If child is sponsored (Name of sponsoring agency)	
Permanent Address	

Details of Brothers/Sisters of the Student

Name	Age	Name of the Institution	Standard

Incase of Staff ward :

Name of the Parent

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B. DETAILS OF PREVIOUS STUDY

Year	School	Standard/Grade	Grade/Marks obtained in final exams

The previous school affiliated to :

☐

SSLC

☐

CBSE

☐

ICSE

☐

Other

Awards won so far in sports, arts or academics

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CHECK LIST FOR THE DOCUMENTS TO BE ATTACHED

1) A Photostat copy of the Birth Certificate

Yes ☐ No ☐

2) Aadhar Card

Yes ☐ No ☐

3) Photostat copy of Caste Certificate (for SC/ST/OBC category only)

Yes ☐ No ☐

4) Photograph (3 Nos.)

Yes ☐ No ☐

5) TC / Record Sheet Class IInd and above

Yes ☐ No ☐

Signature

DECLARATION

I _____ have the authority to admit my child/ward _____ into the school as the parent/ legal Guardian. I undertake the responsibility of providing any evidence needed to support the information provided here, if necessary for any reason. I declare that the statement provided in this application are correct to my knowledge and if found otherwise, I shall abide by the decision of the management. I agree to abide by the rules, regulations and the fee structure of the school.

Date :

Place :

Signature of Parent / Guardian

FOR ST. CLARET SCHOOL OFFICE USE ONLY

Admission Co-Ordinator

Head of the Institution

Date :

Date :