



Registration for Admission

Registration No. Admission No. Date:

To:

The Principal

I wish to register the name of my son / daughter for admission in _____ Standard for the academic session _____.

01	Name of Student (in BLOCK letters)	
02	Date of Birth & Age	
03	Place of Birth	
04	Sex (Male / Female)	
05	Nationality	
06	Father's Name	
07	Father's Qualification	
08	Father's Occupation / Designation	
09	Father's monthly income	
10	Organization where working	
11	Father's Phone, Email	
12	Mother's Name	
13	Mother's Qualification	
14	Mother's Occupation / Designation	
15	Mother's monthly income	
16	Organization where working	
17	Mother's Phone, Email	
18	Name of the Guardian and Relationship	
19	Address	
20	Mother Tongue	