



ADMISSION FORM

Admission No.

Date of Admission

Class in which admission is sought for.....

Affix photo of student

Affix photo of Father

Affix photo of Mother

Affix photo of Guardian (if any)

(To be filled by Parents / Guardian)

Student's Details

- Name of the student
- Gender– Male Female Date of Birth.....
- Date of birth (in words)
- Age of the student as on 31st March
- Nationality 6. Religion
- Category– Gen OBC SC ST
- Preferred phone number for school SMS

Details of Parents

Details of Parents	Mother	Father
(I) Name (in capital letters)		
(II) Nationality / Occupation		
(III) Residential Address with tel. no.		
(IV) Permanent Address		
(V) Name of office & full address with tel.		
(VI) Annual Inc. in Rs.		

Guardian's Details (If any)

1. Name of Guardian
2. Relationship
3. Occupation
4. Residential Address.....
.....Contact No.

Last School's Details

1. Name of the school & address
2. Last class attended
3. Affiliated to
4. Result of last exam
5. Percentage

Details of real brother(s) & sister(s) studying in PGMIS

1. Name Class.....
 2. Name Class.....
- * Blood Group Vision
- * School transport required Yes No
- * Any Chronic disease the child is suffering from

Declaration by parents/guardian:

I/We hereby declare that the above information furnished by me/us is correct to the best of my/our Knowledge & belief.

Father's Signature

Mother's Signature

Guardian's Signature

For Office Use Only

1. DOB Certificate
2. Photocopy of Report Card
5. School Fee
2. Transfer Certificate
4. Photograph

House Allotted

Shaurya Ojas Tejas Prakaram

- * Name has been entered in the class Attendance Register- Yes No
- * Certified that all the entries have been made in the Scholar's Register and the dues have been received.

Date.....

Signature of office Incharge

Admission considered by the school is in accordance with the provision of the board and approved.

Date.....

Signature and Seal of Principal