



Sree Abiraami School

Katpadi Main Road, Keelalathur, Gudiyattam - 635 803 Vellore Dt

Admission No



App No

APPLICATION FOR ADMISSION

- Name of Pupil in full (block letters) :
(as per Birth Certificate /TC)
- Date of Birth (in figures and words) Sex :
- Age on 31st March 20 (in words-number of years and completed months should be given)
- Religion Mother Tongue :
- Nationality and State to which the pupil belongs Blood Group :
- State category to which you belong :
 Scheduled caste Scheduled Tribe Most Backward Backward Other Community
 Please attach community certificate
- Standard to which admission is Sought (in words) Third Language
Second Language
- Name of the School previously attended Standard Date of admission
- No. and date of Transfer Certificate Produced on Admission
- Name of Parent or Guardian and his relationship to the pupil
- Parent's Details

	Father	Mother
Name		
Occupation		
Office Address		
Residential Address		
Tel. : Resi., Office & Mobile		
E-mail		
Annual Income		
- Name, Address and Occupation of local guardian in case of pupil does not live with his / her Parent

I solemnly declare that the above particulars about _____ are true and correct.

I have read the rules of the school and i declare that my ward abide by them and I agree to pay the school dues regularly.

Station :

Date :

Name and Signature of Parent or Guardian

FOR OFFICE USE ONLY

Date of Admission :

Receipt No. :

Standard to which admitted :

Signature of Principal