

logo

SA-ADIYA ENGLISH MEDIUM

RESIDENTIAL SENIOR SECONDARY SCHOOL

Affiliated to CBSE-Delhi (No. 930056, School Code : 06606)

Deli, P.O. Kalanad, Kasargod DT, PIN: 671317

Phone: Office: 04994 238214, Fax: 236776, Principal: 04994 239459

E-mail: semrs@yahoo.com

Admission No [To be filled by office]

Photo

APPLICATION FORM

Admission sought for in class

1. Name of the candidate
(In BLOCK LETTERS)

2. Date of Birth
(For KG and Ist std, enclose proof)

3. Religion & Caste

4. Whether SC / ST / OBC

5. Nationality

6. Blood Group

7. Name of the Institution last studied

8. Mother Tongue

9. Co-curricular activities, if any

10. Whether Physically Handicapped?
If so give details

11. Particulars of Parents

a) **Name of Mother**

b) Occupation

c) Educational Qualification

d) **Name of Father**

e) Occupation

f) Educational Qualification

g) Annual income of Parents

12. Address

[With Pin code & Telephone No.]

13. Name and address of
Local Guardian, if any

13. Whether Day Scholar / Hostler

14. Any other information you would like to
Furnish

15. Particulars of sibling studying in Sa-adiya

DECLARATION

I do hereby, declare that all the particulars furnished above are true and correct to the best of my belief. I have carefully gone through the instructions and conditions, understood them, and agree to abide by them. I agree that the school authorities have every right to take appropriate action against the candidate, if the documents produced found false or forged.

Signature of the Candidate
(Candidate up to Class V need not sign)

Signature of the Parent / Guardian