SARVHITKARI SHIKSHA NIKETAN- KUMARHATTI

Barog Bye Pass Road, Kumarhatti, Solan (H.P.) - 173229

ADMISSION FORM

Date :.....No. ..... Admission No. :.....

1. Full name of the pupil (in block letters)

2. Date of birth (in Christian Era) D D / M M / Y Y Y Y

3. Date of birth in Words.....

4. Age at the time of admission : Year.....Month.....

5. Full name of the father

6. Ful name of the mother

7. (a) Father's Occupation :. .....

   (b) Name of office and full Address:.....

   .....Ph.:.....Mob.:.....

   (c) Full Residential Address:.....

   P.O. .....Teh.....

   Distt.....State.....Pin.....Ph.....Mob. .....

8. Name & Address of local guardian (If any).....

   .....

9. **Class to which admission is being sought**.....

10 Name & Address of the school last attended .....

   .....Class.....

11 Whether it was a Recognized School.....Board.....

12 Result of last examination.....Marks (%).....

13 Third language studied in ( ).....Year of passing.....

14 Whether a Transfer Certificate is attached : Yes/No, No.: ..... Date :.....

15 Whether the student belongs to Scheduled Caste or Scheduled Tribe :.....Yes/No

16 Mother Tongue.....Home Town.....Nationality.....

Declaration by the Parents

I hereby declare that the information furnished by me is correct to the best of my knowledge. I shall abide by the rules of the S.S.N. Residential School given in the **School Diary & Prospectus**

Sig. of Parent

Date:.....

Name.....