

General Information

Present Address

City / Town PIN

Permanent Address

City / Town PIN

Religion Mother Tongue

Whether belongs to Schedule Caste Schedule Tribe O.B.C.

If YES, name the schedule caste/schedule tribe/O.B.C. _____

Annual income of father and mother Below 5 Lacs 5-7 Lacs 7-10 Lacs Above 10 Lacs

Sibling Information

Brother / Sister 1. Name Age

School attending/attended

Brother / Sister 2. Name Age

School attending/attended

Basic health Information of student seeking admission

Allergy / Chronic ailment (if any) _____

Physically challenged / disability (if any) _____

Any other health problem _____

If you want to avail school transport facility Yes No Not yet decided

Mobile Nos. for SMS from school 1. 2.

DECLARATION

I/We certify that the information furnished in this form is true to the best of my knowledge and belief. False or incorrect information supplied in this application could jeopardize selection and enrolment.

Signature of Mother _____

Date

Signature of Father _____

Date

Please submit the following documents along with the form

1. Certified true copies of school report cards of last two years
2. Birth certificate (Self certified photocopy)
3. Transfer Certificate of last school attended (Original)
4. Passport size photographs - 8 (Same as affixed on form)
5. Indemnity Bond duly signed
6. Caste Certificate (Self Certified photocopy)

To be filled by CLGWS official

Following documents are received :

1. Sign _____
2. Sign _____
3. Sign _____
4. Sign _____
5. Sign _____
6. Sign _____

Approved for admission

YES NO

Principal's Signature