



APEX ENGLISH MEDIUM SCHOOL

LALITESWAR NAGAR (BAIDYARAJPUR)

JAJPUR - 755007

PHONE :- 06728-222587 / 223587

Affiliated to C.B.S.E. New Delhi

Govt. Recognized and Registered

OFFICE USE ONLY

FORM NO.

ADMISSION SL. NO.

& DATE _____

APPLICATION FORM FOR ADMISSION 201 - 201

CLASS TO WHICH ADMISSION IS SOUGHT FOR _____

1. Full Name of the pupil _____
(In Capital Letters)
2. Boy / Girl _____
3. Date of Birth (Write both in figure and in words) _____
(Attach Birth Certificate duly attested in case of
1st Admission in Nur/L.K.G / U.K.G. and Std, I & II)
4. Age as on 1st April 20 _____
5. (i) Nationality _____ (ii) Religion _____
6. Full Name of the Mother _____ Ph. No _____
Address (i) Permanent _____
(ii) Present _____
7. Full Name of the Father _____ Ph. No _____
Address (i) Permanent _____
(ii) Present _____
8. Qualification of the (i) Mother _____ (ii) Father _____
9. Occupation of the (i) Mother _____ (ii) Father _____
10. Annual Income of the (i) Mother Rs. _____ (ii) Father _____
11. (i) Full Name, Address and Occupation of the
Local Guardian _____
(ii) Relation with the pupil _____
12. (a) Name of the last School attended, if any _____
(b) Class in which he / she was studying _____
(c) Result of the last Examination _____
(d) Subjects offered _____
(e) Medium of Instruction _____
13. Whether it was a recognised / unrecognised School _____
14. Whether a transfer certificate is furnished _____
If so, mention the No. & Date of transfer certificate _____
(T.C. Should be counter signed)
15. Mother tongue _____
16. Any Hobby (Music / Dance/Art/Other) _____
Extra curricular activities _____
17. Give the brief note on health condition _____