



**ST. JOHN'S VISITATION PUBLIC SCHOOL**

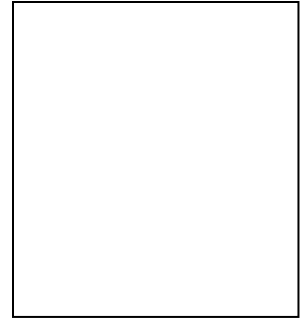
**MUPPATHADAM, ALUVA, 683110**

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**APPLICATION FOR ADMISSION TO .....**

1. Full Name of the Pupil (Capital Letters) : .....

2. Expansion of initials : .....

3. Sex : Male  Female

4. Age : years  Month

5. Date of Birth : 

Date:	Month :	Year:
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( as given in the birth certificate

In Words : .....

6. Religion & Caste : .....

7. Nationality : .....

8. Name of the Father : .....

9. Occupation : .....

: Phone(Office).....

Mob:.....

10. Name of Mother : .....

: Phone:.....

11. Occupation : .....

12. Name of Brothers/Sisters studying in the school :.....

Class, Division :.....

13. Annual income of the Parent : .....

14. Local Address for communication :.....

:.....

Pin code .....

: Phone( Resi).....

15. Permanent Address :.....

:.....

:.....

:Pin code.....

16. School transport facility needed : Yes  No

17. If yes- nearest boarding point :.....

Place : ..... Signature of the Father .....

Date : ..... Signature of the Mother .....

**For Office Use Only**

Verified the copy of the birth certificate against Original

*Name, Designation, date and signature of the person verified the document*

1. Class to which admitted : .....

2. Admission Number : .....

3. Date of Admission : .....

Signature of the Principal :

