

NAZARETH CONVENT HIGH SCHOOL AND JUNIOR COLLEGE

Post Box No :63, St. Mary's Hill, Ootacamund, The Nilgiris - 643001 (Affiliated to ICSE Council, New Delhi) (Reg.No : TN015)

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1. Name [*] :		
2. Class in which pupil now se	eks admission [*] :	
3. Father's Name :		
4. Mother's Name :		
5. Date of birth [*] :	6. Blood Group [*] :	7. Mother Tongue [*] :
8. Religion [*] :	9. Caste [*] :0 BC c (For Statistical P	o OC o SC o ST o MBC o OBC oFC urpose)
10.Nationality [*] :	11. S	tate [*] :
12. Aadhar Number [*] :		
13. EMIS Number [*] :		_14. II Language [*] :
15. Phone Number(s)* : (Should be accessible via with	natsapp)	
16. Occupation of Parent(s)* :		
17.Monthly Income [*] :		
18.Permanent Address* :		
State:	Distr	ict :
Is Boarding required :YES	NO	
18(a). Name of the Guardian :_		
18(b). Occupation of the Guard	ian :	
18 (c). Permanent Address of the	ne Guardian :	
		Phone :

19. Name of the school last studied [*] :	
20. Syllabus [*] :	21. Class last studied :
22. Name of any other sister in school	with class :

(*) Mandatory fields

DECLARATION FROM PARENTS

NAME OF PUPIL :	
FATHER'S NAME :	
MOTHER'S NAME :	
I hereby declare that the date of birth is	and is true as entered in the
admission form is correct and that no alteration of that	at date of birth will be demanded in the future
on the pleas that the correct date of birth was not give	en at the time of admission. I also declare that the
caste ,	is correctly stated in the admission

form and no change will be demanded later on for any reasons.

Signature

- 1. Please attach a copy of the Child's Birth Certificate with name*
- 2. Please attach a copy of the Community Certificate*
- 3. Please attach a copy of the Mark sheet of the last exam attended by the Pupil
- 4. Medical Fitness Certificate from any general practitioner*5. Transfer certificate should be submitted during admission*
- 6. Please attach a copy of the child's Aadhar Card*