

NAZARETH CONVENT HIGH SCHOOL

ST.MARY'S HILL, OOTY-643001



APPLICATION NO:

APPLICATION FOR ADMISSION CLASS – XI (ISC)
20 - 20 .

Affix recent passport size photo of the candidate

APPLICATION TO BE FILLED IN CAPITAL LETTERS ONLY

1. NAME OF THE CANDIDATE : _____

FIRST NAME MIDDLE NAME SURNAME/LAST NAME

2. DATE OF BIRTH : Date Month Year

3. NATIONALITY : _____

4. MOTHER TONGUE : _____

5. RELIGION : _____

(for statistical purposes only)

6. PARENT'S NAME & ADDRESS : _____

PINCODE _____

7. LOCAL RESIDENTIAL ADDRESS OF GUARDIAN : _____

(for boarders only)

PINCODE _____

8. OCCUPATION OF PARENTS : Father _____ Mother _____

9. TELEPHONE NUMBERS : (a) Land line _____ (b) Mobile _____

(c) E-mail _____

10. NAME AND ADDRESS OF THE SCHOOL LAST ATTENDED: _____

11. QUALIFYING EXAMINATION _____

12. MARKS OBTAINED:

NAME OF EXAM	BOARD	MONTH & YEAR OF PASSING	SUBJECTS STUDIED	% OF MARKS

(An attested xerox copy of the mark sheet to be attached with the application form)

13. COURSES OFFERED :

Compulsory subject - ENGLISH

Candidate should tick her preference from the following:

- | | |
|--|--|
| <input type="checkbox"/> PHYSICS, CHEMISTRY, BIOLOGY, MATHS | <input type="checkbox"/> ACCOUNTS, COMMERCE, ECONOMICS, MATHS |
| <input type="checkbox"/> PHYSICS, CHEMISTRY, MATHS, COMPUTER SCIENCE | <input type="checkbox"/> ACCOUNTS, COMMERCE, ECONOMICS, BUSINESS STUDIES |
| <input type="checkbox"/> PHYSICS, CHEMISTRY, BIOLOGY, COMPUTER SCIENCE | <input type="checkbox"/> ACCOUNTS, COMMERCE, ECONOMICS, COMPUTER SCIENCE |

14. PROFICIENCY IN EXTRA CURRICULAR ACTIVITIES: _____

15. FULL POSTAL ADDRESS OF THE CANDIDATE

FOR COMMUNICATION : _____

Note: (a) No candidate shall be permitted to change her subjects after her registration in Class XI

(b) No candidate shall be offered a subject in Class XII which she has not studied in Class XI

(c) At the time of admission the original certificates of the following has to be produced:

- (1) Birth Certificate
- (2) Statement of marks (Class X)
- (3) Transfer Certificate
- (4) Medical Fitness Certificate

Declaration:

I declare that the particulars furnished above are correct and to the best of my knowledge. I will abide by the rules of the school.

Signature of the Candidate

Signature of the Parent

Place:

Date: