



SARASWATI SHISHU MANDIR

RUDRAPUR (U.S.NAGAR)

REGISTRATION FORM

SESSION 2019-20

Email ID : ssmrudrapur@gmail.com

REG. NO.....

1. NAME OF THE CHILD(IN CAPITAL LETTERS)

2. CLASS D.O.B.

3. ADDRESS

.....

4. NATIONALITY WHETHER SC/ST

5. PHONE NO

6. FATHER'S NAME MOTHER'S NAME.....

7. QUALIFICATION..... QUALIFICATION.....

8. PROFESSION PROFESSION.....

9. OFFICE ADDRESS OFFICE ADDRESS

.....

.....

10.TEL. NO. TEL. NO.

11.WHETHER CHILD HAS ATTENDED ANY SCHOOL

12.IF YES, NAME OF THE SCHOOL

13.DETAILS OF SIBLINGS:

a) NAME, CLASS AGESCHOOL.....

b) NAME, CLASSAGESCHOOL.....

c) NAME, CLASSAGESCHOOL.....

14.WHY DO YOU WANT TO ADMIT YOUR CHILD AT

S.S.M

.....

DATE

(SIGNATURE OF PARENT)

Adm. No.



SARASWATI SHISHU MANDIR

NAINITAL ROAD RUDRAPUR, UDHAM SINGH NAGAR
(UTTARAKHAND)

Ph.: 05944- 242235, 241808

E-mail: ssmrudrapur@gmail.com

ADMISSION FORM

2019-20

Affix
(Child's)
photograph

Reg. No

1. Name of the student (In Capital Letters)
2. Date of birth (a copy of birth certificate to be attached) Place of Birth
3. Mother Tongue Nationality
4. Mother's Name Educational Qualification
5. Father's Name Educational Qualification
6. Father's/Guardian's Office Address
7. Father's Designation Income/Salary (per month) Rs.
8. Service/Farming/business (Please cross which is not applicable) **Cast -**
9. Mother's Office Address Office Number
10. Mother's Designation Salary (per Month)
11. Permanent Address
12. Address for correspondence
13. Cell/Phone No. (Off.) Cell/Phone No.(Res.).....Emergency No.....
E-mail:
14. Guardians name & Ph. No. (If other than father)
15. Has your child ever had any serious physical problems, illnesses or injuries? If so, pls describe.....
16. Name and address of two references
(a) (b)
17. Admission is desired in class
18. Name and address of the previous school
- (a) Class in which studying
- (b) Academic attainment of student with percentage (Please a copy of report card)
19. (a) had/applicant's brothers been student or now, please give the name(s)
(1) Class Sec.....
(2) Class Sec.....

I have read 'Instructions' given in the reverse of the form and wish that my ward be registered to take the entrance Test for admission in SSM preparatory School. I note that the acceptance of the registration form and the fee will not involve the school in obligation to admit my ward and to refund. I undertake to abide by the school rules and regulation for admission as enforced from time to time. I also note that my ward will be permitted to take entrance test for admission to the class desired by me provided he/she is eligible for it on the basis of his/her class of study in his/her previous school age.

Encl :-

- 1) Date of Birth issued by Municipal Corporation or an affidavit.
- 2) 4 Photographs of the child.
- 3) 4 Photographs of Parents/Guardian.

(Please mention the name on the back side of the photograph)

Principal

IMPORTANT INSTRUCTIONS

1. Address for correspondence must be written clearly, Any change in the must be intimated to the principal.
2. The acceptance of the registration form and fee is no guarantee that the girl/boy be admitted and it does not involve the school in any obligation to the girl/boy.
3. Cost items brought by students to school if lost, School will not hold any responsibility.
4. E-mail address must be written clearly.
5. Any change in Ph. No. Must be intimated to the school immediately.

*Affix
(Mother's)
photograph*

*Affix
(Father's)
photograph*

*Affix
(Guardian's)
photograph*

(Mother's)
Signature

(Father's)
Signature

(Guardian's)
Signature

Admission granted Class Section

Fee Received on Receipt No.

Admission Date: