# SHATAVISHA PUBLIC SCHOOL

**Brahmanpara, Haripal, Hooghly – 712405, West Bengal, India.**
**Affiliated to the Council of CISCE, New Delhi.**

## ADMISSION FORM

**(For Academic Year 20____ - 20____)** **Serial No.: - _____**

Paste Child Photograph

***Please fill in the form with Capital Letters:***

1) Name of the Student:- .....
2) Date of Birth:- Day ..... Month ..... Year .....
3) Name of the Previous School attended .....
4) Academic Record in Previous School:
   Class passed ..... Session from ..... to .....
5) Nationality: ..... Religion:- ..... Mother tongue:- .....
6) Particulars of brothers/sisters of the child studying/studied in this school:-
   i) .....
   ii) .....
7) Father`s Name:- ..... Mobile No.:- .....
   Qualification:- ..... Occupation:- .....
8) Mother`s Name:- ..... Mobile No.:- .....
   Qualification:- ..... Occupation:- .....
9) Name of the Guardian:- ..... Mobile No.:- .....
   Qualification:- ..... Occupation:- .....
   Relationship with the child:- .....
10) Permanent address of S. No. H/I/J:- .....
   .....
   ..... Pin code:- .....
   Telephone No.:- ..... Mobile no.:- .....
11) Correspondence address of S. No. H/I/J:- .....
   .....
   ..... Pin code:- .....
   Email:- ..... WhatsApp No.:- .....
12) Second Language: - ☐ Bengali ☐ Hindi

**I, the undersigned, certify that I am the Father/Mother/Guardian of** ..... ..... **and the information furnished above is correct to the best of my knowledge and belief. I have read the school prospectus & I will abide by the school rules & regulations in all respects. I do understand that the decision of the Principal shall be binding on me.**

**Date:-** ..... _____ _____ _____

**Signature of Father** **Signature of Mother** **Signature of Guardian**

---

Admitted to Class ..... Date of Admission:- .....
Session:- 20____ - 20____

***Principal***