

Rojavanam International School

Address: Rojavanam International, School No:7-25D, Rojavanm Nagar
Puthugramam, Nagercoil-629 302,
Phone: 9486000745 | 9486000115,

ADMISSION FORM

Admission Form for Session: 20____ -20____

Admission no: _____

Date :_____

(USE CAPITAL LETTERS)

Student Name:

Father's Name:

Mother's Name:

Aadhar Card Number:

Date of Birth:/...../..... (Day/Month/Year)

Sex: Male Female

Category SC/OBC/ST: Caste

Religion:

Student Email:

Permanent Address:

.....

.....

Phone No:

Mother Tongue:.....Nationality:.....

Bus facilities required(Yes/No) if Yes, from.....to.....

Class and School in he/she has been studying in the last school:.....

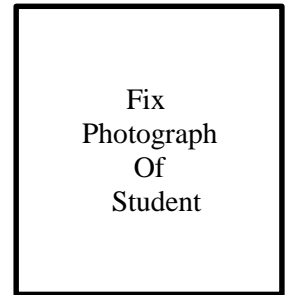
Name of school:.....

Class:.....

Medium:.....

Transfer Certificate/School leaving certificate:.....

Single child(only boy/ only Girl):.....



Particulars of all Brothers/Sisters study in same school:.....

S.NO	Name Of the Child	Age	Class & section
1.			
2.			
3.			

Any Physical ailment:.....

Special Interest:.....

Family Information(WRITE IN CAPITAL LETTERS)

Mother's Name:.....

Academic Qualification.....

Occupation & Designation.....

Address of the origination where employed.....

.....

Office Tel. No.....Mobile No.....

Email.....

Father's Name:.....

Academic Qualification.....

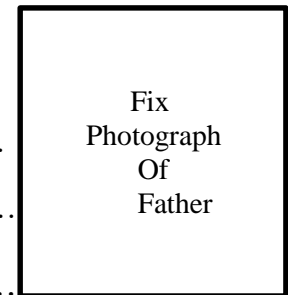
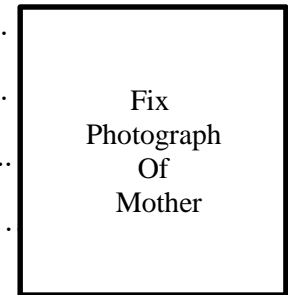
Occupation & Designation.....

Address of the origination where employed.....

.....

Office Tel. No.....Mobile No.....

Email.....



I certify that I am the parent / bonafide guardian of the child and information given in this form is true to the best of my knowledge. I have carefully read the prospectus and agree to abide by the rules, regulations And procedures laid down there in and accept that they change from time to time at the directions of the school management and extend my full co-operations to keep things moving in a healthy manner.

Signature of mother.....

Date:.....

Signature of father:.....

Date:.....

FOR OFFICE USE ONLY

TO BE ATTACH FOLLOWING DOCUMENTS:

- | | | | |
|---|--------------------------|---|--------------------------|
| 1. Attested Xerox copy of Date of Birth Certificate | <input type="checkbox"/> | 5. School leaving cert./ Transfer cert. | <input type="checkbox"/> |
| 2. Photographs of student | <input type="checkbox"/> | 6. Passing certificate mark sheet | <input type="checkbox"/> |
| 3. Parent's Photographs | <input type="checkbox"/> | 7. Character Certificate | <input type="checkbox"/> |
| 4. Attested Xerox copy of Aadhar card | <input type="checkbox"/> | 8. Attested Xerox copy of SC/OBC/ST | <input type="checkbox"/> |

Admission No: _____ Reg No: _____ Admitted to class: _____

Date: _____ Section: _____

Checked and Recommended

Principal

FOR FURTHER INFORMATION, PLEASE CONTACT OUR ADMISSIONS OFFICE
PHONE: 9486000745 | 9486000115