

ST. MICHAEL'S CONVENT PRE- PRIMARY SCHOOL KARWAR

APPLICATION FOR NURSERY ADMISSION

1. NAME OF THE PUPIL IN FULL _____
2. BOY OR GIRL : _____ 3. DATE OF BIRTH _____
IN WORDS _____
4. PLACE OF BIRTH : _____ TOWN _____
DISTRICT _____ VILLAGE _____
5. FATHER'S NAME _____ LIVING/NOT LIVING
6. MOTHER'S NAME _____ LIVING/NOT LIVING
7. FATHER'S OCCUPATION : _____ QUALIFICATION: _____
8. MOTHER'S OCCUPATION : _____ QUALIFICATION: _____
9. FATHER'S ANNUAL INCOME: _____
10. PUPIL STAYING WITH : _____ PARENTS/GUARDIAN
11. NATIONALITY, RELIGION, CASTE: _____
12. MOTHER TONGUE : _____
13. CHILD'S AADHAR NO. : _____
14. PERMANENT ADDRESS OF THE PUPIL: _____
15. MOBILE NO. _____
16. WHETHER THE BIRTH CERTIFICATE HAS BEEN PRODUCED: _____
17. PH _____

I request that the above named pupil may be admitted to

NURSERY English Medium

Place: _____

Date: _____

SIGNATURE OF HEADMISTRESS/
SISTER SUPERIOR

SIGNATURE OF PARENTS/GUARDIAN