



MAR THOMA RESIDENTIAL SCHOOL

P. B. No. 1, R.S.P.O., TIRUVALLA - 689 111
Phone: Office - 0469 - 2701298, 2970004

Recent
Photograph

No. _____

Date of issue _____

APPLICATION FOR PRE - K.G.

1. Name of pupil (In block letters): _____ (as in the Birth Certificate)
2. Date of birth (in figures): _____ (Attach copy of the birth Certificate)
(in words) : _____
3. Nationality : _____ Sex: Male / Female Aadhar Number _____
(Attach copy of Aadhar)
4. Religion : _____ Category: (Gen/SC/ST/OBC) _____
5. Caste : _____ Denomination _____ Parish _____
6. Mother Tongue : _____
7. Whether living with : Parent/Guardian _____
8. a) Name of Father : _____ Mobile no. _____
b) Occupation : _____ email id. _____
c) Official address : _____
d) Name of Mother : _____ Mobile no. _____
e) Occupation : _____ email id. _____
f) Official address : _____
g) Residential address : _____
(Land line number if any) : _____ Whatsapp No. _____
9. a) Name and address of guardian: _____
(with telephone number if any): _____
10. a) Whether father or mother is an old student of the school : Yes / No
b) If yes, give particulars : _____
11. a) Whether any brother or sister studying in this school : Yes / No
b) If yes, give particulars : _____
12. Blood group : _____
13. Any information about the general health of the child : _____

DECLARATION

I declare that the statement given above are correct and I hereby promise to abide by all the rules and regulations of the school in force from time to time.

Place _____

Date _____

Signature of Parent/Guardian _____

For Office Use:

Admission: Granted / Not granted Date of Admission _____ Principal's Signature _____

Admission Number: _____