

# Saraswathy Vidyanikethan Central School



**KODAKARA, PERAMBRA P. O. , THRISSUR 680 689 Ph : 9048383804**

ISO 9001:2015 Certified    CBSE Affiliation No. 930179

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Photo

S.No. \_\_\_\_\_

## ADMISSION FORM

Admission No.....(To be filled by office)

**CLASS** to which admission sought:.....Session:.....

**PERSONAL DETAILS:-**

1. **Name** : .....

2. **Gender** : Male                       Female                       Any other

3. **D.O.B.** : Date                       Month                       Year

In words .....

(Attach Date of Birth Certificate issued by the Competent Authority)

4. **Details of parents :-**

Details	Mother	Father/Guardian
Name		
Educational Qualification		
Residential Address		
Contact Number		
Whatsapp Number		
E-mail		
Occupation		
Official Address		
Annual Income		

5. **Whether the candidate is:-**

(i) Single Girl Child:                      Yes                       No

(ii) Specially abled (Divyangjan):                      Yes                       No

(iii) Belonging to the EWS:                      Yes                       No

(Attach proof wherever applicable)

6. **Category:** (Attach proof) : General  SC  ST  OBC  OEC  EWS

7. **Aadhar No.** (Not mandatory) (Attach proof).....

8. **Name & Address of the last attended school:**.....

9. **Class Last attended**.....

10. **Last school affiliated is**

(i) CBSE                       (ii) ICSE                       (iii) IB

(iv) State Board                       (v) Any other (please specify).....

**11. Result of last class :**

Subject	Maximum Marks	Marks obtained	% of Marks	Remarks
TOTAL				

**12. Transfer Certificate Details\* :-**

Transfer Certificate No:-.....

Date of Issue:-.....

**13. Group Applied for (Choose any) groups in the order of Preference....1.2.3..)**

**SCIENCE STREAM**

Group 1	English	Phtsics	Chemistry	Maths	Biology	<input type="checkbox"/>
Group 2	English	Phtsics	Chemistry	Maths	Computer Sc.	<input type="checkbox"/>
Group 3	English	Phtsics	Chemistry	Skt	Biology	<input type="checkbox"/>
Group 4	English	Phtsics	Chemistry	Skt	Computer Sc.	<input type="checkbox"/>
Group 5	English	Phtsics	Chemistry	P.E.	Biology	<input type="checkbox"/>
Group 6	English	Phtsics	Chemistry	P.E.	Computer Sc.	<input type="checkbox"/>

**COMMERCE STREAM**

Group 7	English	Buss Studies	Accountancy	Economics	Maths	<input type="checkbox"/>
Group 8	English	Buss Studies	Accountancy	Economics	Skt.	<input type="checkbox"/>
Group 9	English	Buss Studies	Accountancy	Economics	P.E.	<input type="checkbox"/>
Group 10	English	Buss Studies	Accountancy	Economics	Informatics Prase	<input type="checkbox"/>

**HUMANITIES STREAM**

Group 11	English	History	Political Sc.	Economics	Skt.	<input type="checkbox"/>
Group 12	English	History	Political Sc.	Economics	P.E.	<input type="checkbox"/>

**14. Group Provided**

**15. Details of siblings (if any)**

Name	Brother/Sister		School studying in

**16. Additional Informations**

Bus Stop required	
Medical history , if any special care if required, specify	

**DECLARATION**

I hereby declare that the above information including Name of the Candidate, Father's/Guardian's name, Mother's name and Date of Birth furnished by me is correct to the best of my knowledge & belief. I shall abide by the rules of the School.

Date.....

Place.....

Signature of the Parents(s)/Guardian  
Relation with candidate .....

Correct entries from the Admission Forms to Admission and Withdrawal Register have been made on page no.....on dated.....

Signature of the Manager

Signature of the Principal

\* In case, student is from other board, Transfer Certificate should be countersigned by the Competent Authority.