

ADMISSION FORM



BETHEL MISSION SCHOOL

UTTARPALI, KISHANGANJ (BIHAR)

Regd. under Bethel Educational Sovereign Trust, H.O. Erode (Tamilnadu)

Affiliated to CBSE, New Delhi

Affiliation Number - 330430

1. Name of the Candidate :

a) Sex :

b) Date of Birth :

c) In words :



2. Mother's Name :

a) Occupation : b) Annual Income :

c) Mobile No. :

3. Father's Name :

a) Occupation : b) Annual Income :

c) Mobile No. :

4. Guardian's Name :

a) Occupation : b) Annual Income :

c) Mobile No. :

5. Details of the Candidate : a) Blood Group :

b) Nationality : c) Religion :

d) Category : e) Physically Handicapped : Yes No

f) Specify if any : Attached Certificate : Yes No

g) Admitted in Class : h) Registration No. : Date :

i) Transfer Certificate Attached : Yes No

j) Marksheet attached last exam passed : Yes No

k) Admitted in Hostel : Yes No

6. Address : a) Corresponding Address :

Village/Mohalla : P.O. :

P.S. : District :

State : Pin Code :

b) Permanent Address :

Village/Mohalla : P.O. :

P.S. : District :

State : Pin Code :

DECLARATION

I do hereby solemnly affirm and state that above furnished particulars are true to the best of my knowledge and belief. If any false found in this, the school has right to take any kind of disciplinary action against me.

I accept and abide by all the rules and regulations of this school regarding with my child.

Place :

Date :

Signature of Parents

FOR OFFICE USE ONLY

1) Admission Number :

2) Date of Admission :

3) Registration Number :

4) Date of Registration :

5) Enclosures attached :

- a) Birth Certificate : Xerox copy of Municipality / Affidavit in Original
- b) Transfer Certificate in Original
- c) Mark Sheet of last class passed

Verified by.....

Signature

Signature of the Principal