



ST. THOMAS PUBLIC SCHOOL

IRINGOLE, PERUMBAVOOR

(A Senior Secondary School Affiliated to CBSE, New Delhi, No. 930778)

Phone : 0484 2524398, Email: stthomaspublicschoolpbvr@gmail.com, Website : www.stthomaspublicschool.org

APPLICATION FORM

Use only CAPITAL LETTERS. Name of parents / wards should be exactly the same as printed in the birth certificate.

Name of pupil	<input type="text"/>																										
Permanent residential address	<input type="text"/>																										
	<input type="text"/>																										
	<input type="text"/>																										
	<input type="text"/>																						PIN	<input type="text"/>			
Address for communication	<input type="text"/>																										
	<input type="text"/>																										
	<input type="text"/>																										
	<input type="text"/>																						PIN	<input type="text"/>			
Aadhar No.	<input type="text"/>																						PIN	<input type="text"/>			
Telephone No. with code	<input type="text"/>										Mobile	<input type="text"/>															
Gender	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>																							
Standard to which admission is sought	LKG	<input type="checkbox"/>	UKG	<input type="checkbox"/>	Year of admission	20	<input type="text"/>	<input type="text"/>																			
Date of Birth:	Date	<input type="text"/>	<input type="text"/>	Month	<input type="text"/>	<input type="text"/>	Year	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																
Nationality	<input type="text"/>										Blood Group	<input type="text"/>															
Religion	<input type="text"/>										Caste	<input type="text"/>															
Whether belongs to SC/ST/any other backward class (for statistical purpose only)	General	<input type="checkbox"/>	SC/ST	<input type="checkbox"/>	OBC	<input type="checkbox"/>																					
Annual Income	<input type="text"/>																										
Name & address of the school last attended	<input type="text"/>																										
	<input type="text"/>																										
Reasons for withdrawal from previous school	<input type="text"/>																										
Name of Board	<input type="text"/>																										
Whether special care required? If yes, mention	<input type="text"/>																										

FAMILY DETAILS

FATHER

Name

Occupation

Official address

E-mail

Telephone No. with code Mobile

MOTHER

Name

Occupation

Official address

E-mail

Telephone No. with code Mobile

SIBLINGS

Studying in St. Thomas Public School, Iringole, Perumbavoor

1	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
2	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
3	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

Signature of Father / Mother

Signature of Parent / Guardian

Name & relationship to the ward

FOR OFFICE USE ONLY

Admitted / Rejected

Admitted to class for Academic Year 20 20

Admission Number Transfer certificate No.

Attested copy of Birth Certificate Yes No Date of submission

Application submitted on

Office

Principal