



# Hagia Sophia Public School

Affiliated to CBSE – No. 930843

Mattakuzhi, Puthencruz, Pin – 682 038, Ph: 0484 – 2734300

## REGISTRATION FORM FOR ADMISSION

1. Name of Pupil : .....
2. Male / Female : .....
3. Religion and Caste : .....
4. Date of Birth : .....
5. Class to which admission is sought : .....
6. Class in which currently studying : .....
7. DETAILS OF FATHER
  - a) Name : .....
  - b) Occupation : .....
  - c) Educational Qualification : .....
  - d) Residential Address with Tel.No : .....
  - e) Office Address with Tel.No : .....
8. DETAILS OF MOTHER
  - a) Name : .....
  - b) Occupation : .....
  - c) Residential Address with Tel.No : .....
  - d) Office Address with Tel. No : .....
9. DETAILS OF LOCAL GUARDIAN
  - a) Name : .....
  - b) Occupation : .....
  - c) Residential Address with Tel.No : .....
  - d) Office Address with Tel. No : .....
10. Address to which communication should be sent : .....
11. Whether the applicant's brother or sister is a student of the School :
 

<u>Name</u>	<u>Class</u>
1. ....	.....
2. ....	.....
12. Bus No. and Stop : .....

Place :  
Date :

Signature of Parent / Guardian  
Name :

FOR OFFICE USE

Principal