

STERLING PUBLIC SCHOOL

SISWA KHURD, SISWA BAZAR, MAHARAJGANJ - 273153

Mob. 09336232523, 09369363800, 09415246461

E- Mail : sterlingpublicschool@gmail.com



Admission No.

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ADMISSION FORM

CLASS FOR WHICH ADMISSION IS SOUGHT FOR

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1. Name of student : Mas/Km _____

2. Date of birth & (As on 1st April of current year) : Date _____
Age _____ Yrs _____ Months _____

3. Mark of identification of student : _____

4. (a) Name of Father : Mr. _____
(b) Name of Mother : Smt. _____

5. Profession of father(Tick ✓) : Service / Business / Agriculture

6. Relationship of child with Guardian (if applicable) : _____

7. Address (A) Present : House No. _____
Mohalla _____
P.O. _____
Distt. _____

(B) Permanent : House No. _____
Mohalla _____
P.O _____
Distt. _____

(C) Local contact Tel.No. (if any) : Residence _____
Office _____

8. Religion & Caste : Religion _____ Caste _____

9. Whether Scheduled Caste/ Tribe? (Tick Marks) Yes _____ No _____

10. (a) Name of last institution attended (if any) : _____
(b) Last class passed : _____

11. Birth Certificate Attached Yes _____ No _____

12. (a) School Transport Facility Required (Tick ✓) Yes _____ No _____
(b) Place of boarding the bus (if yes) : _____

13. T.C. attached Yes _____ No _____

NOTE :- Submit Birth Certificate in support of Age/Date of Birth of the child & T.C. wherever applicable.

I will abide by all the rules & regulations of the School as mentioned in School Prospectus & Diary & Pay School fees & transport charges (if facility is utilized) as applicable from time to time. I will also read the school diary thoroughly and comply the requirements.

Specimen Sig. of Parents

ADMITTED/NOT ADMITTED

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Father

Mother

Sig. of Guardian

Usual signature of
Parent/Guardian