

Form No. :

Date of issue :



Anamay

H.Sc. School-

CBSE Affiliation No. 1030693

Near Suncity-2, A.B. Road, Dewas (M.P.), Ph. 259258-259259

website: www.anamayschool.com, E-mail : info@anamayschool.com

[Facebook.com/anamayschool](https://www.facebook.com/anamayschool) twitter.in/anamayschool

Please stick
recent
Passport size
coloured
photograph of the
student

APPLICATION FOR ADMISSION

(Please read the instructions for completing the Application Form)

1. Applicant's Name _____

Surname

First Name

Applying for Class _____ Academic Year _____ Mother Tongue _____

Caste _____ Gender _____ Nationality _____ Religion _____

Date of Birth (in figures) _____

According to Christian era. Date Month Year

(in words) _____

Category (SC, ST, OBC, Other) _____

(Please enclose certificate, if any)

Academic History :

Affiliation of School	Name of the previous school with address	Class	Result with % age	Medium of Instruction
MPBSE/CBSE				
ICSCE				

Registration No. (For Class IX-XII) _____

2. Name of Parents or Guardian :

Father _____ Local Guardian with relation _____

Mother _____

Address _____ Permanent Address _____

Occupation _____ Occupation _____

Phone (Office with code) _____ Phone (Office with code) _____

Phone (Res. with code) _____ Phone (Res. with code) _____

Mobile (1) _____ (2) _____ Mobile (1) _____ (2) _____

Total Annual Income of Parents _____

Specimen Signature :

Father _____ Guardian _____

Mother _____

3. Other Children in the Family : (Eldest to Youngest)

Name	M/F	Age	Present School / College	Class
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

4. Does your ward have any physical disability ? (Please specify) _____

5. Enclosures :
- 1. Birth Certificate : Original Yes / No
 - 2. Transfer Certificate : Original Yes / No
 - 3. Result Sheet : Previous class photocopy Yes / No
 - 4. Photograph : Passport size (two) Yes / No

CERTIFICATION

I certify that the above information is correct. I confirm that, I will abide by the rules and regulations of the Institution.

Signature _____
Parent / Guardian

Date _____

FOR OFFICE USE ONLY

To be filled at the time of Registration :

Registration No. _____ Scholar No. _____

Recommended for Class _____ Section _____

Registration Receipt No. / Date _____

Tuition Fee Receipt No. / Date _____

Caution money Receipt No. / Date _____

Student's Code _____

Date _____
(of admission)

Accounts Officer

Principal