



SHIVAM CONVENT SCHOOL

ANAND NAGAR SHUKLAGANJ

UNNAO – 209861

SESSION (2021-22)

(For Office Use Only)

Sr. no.

Reg. no.

Receipt no.

Admission granted for Class Sec

Date :

Principal Sign.

APPLICATION FOR ADMISSION

Applying For Class

School Transport

Student

Father

Mother

Local Guardian (If any)

INFORMATION ABOUT THE APPLICANT :

Name of the applicant student : First Name Middle Name Last Name

Date of Birth :

Gender : Male Female

Nationality : Caste Sub caste

Residence Address :

Aadhar No. : First Language

INFORMATION ABOUT THE APPLICANT'S LAST SCHOOL EXPERIENCE :

Name of the last School attended by you :

Grade you were last studying in :

INFORMATION ABOUT APPLICANT'S PARENTS AND GUARDIAN:

Contact person for School related information like School trips, PTM, Exam Results and Fees: Father Mother Guardian

Name of the Father :

Highest Educational Qualification: Occupation :

Residence Address :

Aadhar No. :

Mobile No. : Signature :

Name of the Mother :

Highest Educational Qualification : Occupation :

Residence Address :

Aadhar No. :

Mobile No.: Signature :

Name of the Local Guardian (If applicable) :

Highest Educational Qualification : Occupation :

Residence Address :

Aadhar No. :

Mobile No. : Signature :

Siblings already studying or applying to Shivam Convent School (please give details) :

1. Siblings Name : Class :

2. Siblings Name : Class :

HEALTH INFORMATION RECORD

Name of Student :

Grade : Age :

Blood Group :

Please provide a copy of the vaccination card / report along with this form for students applying to grades KG to 5.

Any previous illness or operation :

Allergic to any food/Medicine:

Any other important information about your child's health that you think school should be aware of, please mention here:

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Signature of the Parent

SCHOOL TRANSPORT REQUISITION

Name of Student :

Grade :

Date of Admission :

Residence Address :

Phone (Landline) : Mobile:

Transport person incharge :

Emergency Contact Person :

Emergency Contact (Mobile) :

Parent Signature:

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(Office Incharge)