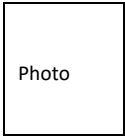


**ST. JOSEPH'S CONVENT ICSE SCHOOL**

**Lodhivali, Tal. Khalapur, Dist – Raigad (Maharashtra)**

**ADMISSION FORM**  
To be filled by Parents or Guardians



Name in Full (Capital): .....

Father's Name (Capital): .....

Mother's Name (Capital): .....

Surname (Capital): .....

Date of Birth (in figures)...../...../..... (in words).....

.....

Place of Birth.....

Adhar Card No: ..... UDISE No.....

Permanent Address of Parents/Guardian: .....

.....

Nationality: Father..... Mother.....

Mother Tongue: .....

Occupation/ Designation of Father: .....

Office Address: .....

.....

Office Phone No.....Resi. Phone No: .....

Religion: .....

Caste and Sub – Caste of the Child.....

SC	ST	OBC	General
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Name of the Last school Attended: .....

Class Passed: .....

Class in which Seeking Admission: .....

Certified That above information is correct.

I, Mr. Mrs. (Name).....Father/Mother of Name.....class.....

Here by agree to educate my child in English Medium and follow the rules and regulations of this school prescribed and updated, and agree to pay the fees of this school.

Date:...../...../.....

Signature of Parents

Principal