

SALSABEEL CENTRAL SCHOOL

(SENIOR SECONDARY)

Mundur - Peramangalam P.O., Thrissur - 680 545 Ph : 2212113, 2212245, 8943337800 * Affiliated to C.B.S.E., Delhi - No : 930310

Photo

APPLICATION FOR ADMISSION

(Please read carefully and fill in block letters)

1.	NAME OF THE CANDIDATE WITH INITIAL (IN ENGLISH	H):	
	(IN MALAYALAN	1):	
2.	SEX: BLOOD GROUP:		NATIONALITY:
	RELIGION: CASTE	:	SC / ST :
3.	DATE OF BIRTH (IN FIGURES)	:	
	(IN WORDS)	:	
4.	PLACE OF BIRTH WITH DISTRICT	:	
5	FATHER'S NAME & ADDRESS	:	
			PH.:MOBILE:
6.	OCCUPATION OF FATHER	:	
7.	MOTHER'S NAME & OCCUPATION	:	
8.	ANNUAL INCOME OF THE PARENTS	:	
9.	PRESENT ADDRESS FOR COMMUNICATION	:	
			PH. : MOBILE :
10.	NAME OF LOCAL GUARDIAN AND RELATIONSHIP	:	
11.	CLASS TO WHICH ADMISSION IS SOUGHT	:	
12.	DETAILS OF QUALIFYING EXAMINATION PASSED		
	NAME OF EXAMINATION AND YEAR	:	
	NAME OF THE SCHOOL	:	
13.	MARKS OBTAINED IN ANY EQUIVALENT EXAMINATION WITH AGGREGATE PERCENTAGE	ON :	
	ENGLISH: MALAYALAM / HINDI	/ AF	RABIC : MATHEMATICS :
	SCIENCE : SOCIAL SCIENCE :		

- 14. COURSES OFFERED FOR SENIOR SECONDARY CLASS
 - 1. ENGLISH, PHYSICS, CHEMISTRY, MATHEMATICS, COMPUTER SCIENCE
 - 2. ENGLISH, PHYSICS, CHEMISTRY, MATHEMATICS, LANGUAGE
 - 3. ENGLISH, PHYSICS, CHEMISTRY, BIOLOGY, MATHEMATICS
 - 4. ENGLISH, PHYSICS, CHEMISTRY, BIOLOGY, LANGUAGE
 - 5. ENGLISH, PHYSICS, CHEMISTRY, BIOLOGY, COMPUTER SCIENCE
 - 6. ENGLISH, BUSINESS STUDIES, ACCOUNTANCY, ECONOMICS, INFORMATICS PRACTICES / MATHEMATICS

DECLARATION

1	SON/DAUGHTER OF MR / MRS
HEREBY AGREE TO ABIDE BY THE RUI	LES AND REGULATIONS THAT MAY BE ENFORCED BY THE SCHOOL AUTHORITIES
FROM TIME TO TIME.	
DATE & PLACE :	NAME & SIGNATURE OF STUDENT
F	HERE BY CERTIFY THAT MY WARD
	ADMITTTED TO PLUS ONE / PLUS TWO SHALL ABIDE BY THE RULES AND REGU-
LATIONS LAID DOWN BY THE MANAGE	EMENT OF THE SALSABEEL CENTRAL SCHOOL. THE PARTICULARS FURNISHED
ABOVE ARE CORRECT TO THE BEST	OF MY KNOWLEDGE AND BELIEF. I WILL NOT RAISE ANY COMPLAINT AGAINST
ANY DISCIPLINARY ACTION THAT MAY	BE TAKEN BY THE PRINCIPAL ON MY WARD.
DATE & PLACE :	NAME & SIGNATURE OF PARENT / GUARDIAN
	FOR OFFICE USE ONLY
STREAM	
ADMISSION NO.:	DATE OF ADMISSION CLASS :
CHECKED BY:	SIGNATURE OF PRINCIPAL:
DATE	DATE :