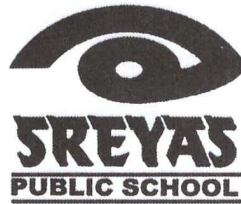


# SREYAS PUBLIC SCHOOL & JUNIOR COLLEGE

*(Affiliated to CBSE, Delhi No.930299)*



## REGISTRATION FORM

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### **VISWA SREYAS EDUCATIONAL FOUNDATION**

Reg. No.K.179/99

Ponkunnam P.O., Pin:686 506

Kottayam Dist., Kerala

Tel : 04828-297021, 297027, 7558881442

E-mail: [sreyascbse@gmail.com](mailto:sreyascbse@gmail.com)

Website : [www.sreyaspublicschool.com](http://www.sreyaspublicschool.com)

No. **REGISTRATION FORM**

Name of Pupil			
Residential Address & Telephone No.			
Sex : <input type="checkbox"/> Male <input type="checkbox"/> Female	Religion :	Caste :	Gen/SC/ST/OBC
Date of Birth			
Age (As on 1st June.....)	Years	Months	
Aadhaar No.			
Admission sought for	Standard		
Name of Father			
Educational Qualification			
Occupation			
Office Address & Telephone No.			
Name of Mother			
Educational Qualification			
Occupation			
Office Address & Telephone No.			
Annual Income of Parents			
Name, Address & Telephone No. (If applicable)			
Details of Earlier Schooling			
Whether School Bus Facility is required	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes		

**\* Boarding Point**

*\* To be selected from the list available at School Office. No other stop will be allowed*

I.....understand that the selection shall be on the basis of a Test / Interview and the decision of the Selection Committee is binding on me. On admission of the child to school; I agree to abide by the rules and regulations prevailing in the school.

Place :

Date :

Name &amp; Signature of Parent / Guardian

**FOR OFFICE USE**

Date of Interview

Result

**NB : \* Fees once paid will not be refunded**