M. J. MEMORIAL SCHOOL (HIGH SCHOOL)

Affiliated to the WBBSE | Regd. No. : IV-1903-06676/2016 | Index No. : R1-291

Vill. : Jairampur, G.P. : Sultannagar, P.O. : Bhatol, Dist. : Malda, West Bengal - 732140.

Website : www.mjm-school.com, E-mail : mjmschool.2016@gmail.com

ADMISSION FORM

Form No.

(Session : 20..... - 20.....)

Admission for Class : ..... (Nursery - IX)

Photo Affix here

1. Name of Student (in Block Letters) : _____
2. S/o / D/o : _____
3. Full Address (Present) : _____
4. Full Address (Permanent) : _____
5. Date of Birth : Day [ ][ ] Month [ ][ ] Year [ ][ ][ ][ ] AGE : [ ][ ] YEAR
6. Gender : MALE [ ] FEMALE [ ] 7. AADHAR NO. [ ]
8. Catagory : SC | ST | OBC | GEN | PH 9. BLOOD GROUP : [ ] 9. RELIGION : [ ]

(PLEASE TICK THE ABOVE)

GUARDIAN DETAILS

1. Father's Name : _____
2. Educational Qualification : [ ]
3. Occupation : [ ]
4. Contact No. : MOBILE [ ] WhatsApp [ ]
5. Mother's Name : _____
6. Educational Qualification : [ ]
7. Occupation : [ ]
8. Contact No. : MOBILE [ ] WhatsApp [ ]

Certifiy that the above particulars given by me are true, correct and I agree to abide by the rules of the school.

SIGNATURE OF STUDENT

Date :.....

SIGNATURE OF GUARDIAN

Date :.....

N.B : Please Enclose :- Birth Certificate Xerox (1 Copy) ; Aadhar Card Xerox (1 Copy) ; Passport Size Colour Photos (3 Copies)

OFFICE USE ONLY

NAME OF STUDENT.....S/o / D/o.....

ADMITTED IN CLASS..... ON.....Contact No.....

Date :.....

Signature of the Principal