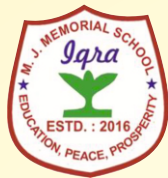


M. J. MEMORIAL SCHOOL (HIGH SCHOOL)



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.....)

Photo
Affix here

Admission for Class : (Nursery - IX)

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

Certify 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