

Student Application Form



**BISHOP SCOTT
GIRLS SCHOOL**

Serial No.: _____

School Name: Address: Tel. No.:	Student's Photo	Father's/ Mother's/ Photo	Guardian's Photo
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Managed by:
(Trust/Society)

Name of Student:
Surname First Name

Middle Name

Date of Birth:
Date Month Year

Age:
as on Years Months Days

Gender: M F

PERMANENT ADDRESS

Village/Town District:
 State PIN

Height:
Ft Inches Cms

Weight: Kg

Blood Group: A B AB O +ve -ve

Caste: SC ST BC OBC OTHER Religion:

Languages Spoken at Home: (1) (2) Mother Tongue:
 Siblings in the School:

Record of Previous Class Attended

S. No.	Name of School	Class		Year		Board CBSE/ICSE/ State	Medium of Instruction	% of Marks in Last Class Passed	Reason for Leaving
		From	To	From	To				

Physical/Mental Disability and Medical History (if any)

S. No.	Type	Details	Present status
1.	PHYSICAL DISABILITY		
2.	MENTAL DISABILITY		
3.	PAST ILLNESS.		
4.	ALLERGY		
5.	CHRONIC MEDICAL PROBLEM		

INSTRUCTIONS

1. In case the student is selected for admission the acknowledgement slip should be enclosed with the Admission Form.
2. The under mentioned documents will be required at the time of admission:
 - (a) Original & one photocopy of the Birth Certificate (For Admission to Standard I).
 - (b) Original & one photo copy of Transfer Certificate from Previous School (For Class II Onwards).
3. Proof of Residence (Photo copy of Ration Card or Passport or Telephone Bill or Electricity Bill).
4. Photographs (2.5 cm x 3 cm): Child (5 nos.), Father or Mother (2 nos.) and Guardian (2 nos.).