



# MANASTHALI EDUCATION CENTRE

Affiliated To C.B.S.E., New Delhi

Reoti, Ballia (U.P.)



## ADMISSION FORM

Sr. No. ....

Admission No.....

Class in which admission is sought for : .....

Session.....

Passport Size  
Photograph  
of the Student

1. (a) Name of the Child in full (in capital letters) : .....

(b) Sex : Male  Female

2. Date of Birth : Day   Month   Year

In words .....

Age of the student as on 31- March : Year   Month   Day

3. Blood Group of the child :

4. Do you belong to Gen./SC/ST/OBC/EWS/Disabled/S.G. Child? attach certificate.

Gen. Cat.  SC  ST  OBC  EWS  Disabled  SG Child

### 5. Details of parents :-

Details of Mother/Father	Mother	Father
Name (in capital letters)		
Nationality & Occupation		
Full residential address with tele. no.		
Name of Off. & Full Add. with Tele.		
Permanent Address		
Annual Income in (₹)		

6. Name & Address of local guardian (if any) : .....

7. Name & Address of the School last attended with Class : .....

8. Whether last school was CBSE affiliated : .....

9. If, the last school was not affiliated with CBSE, specify name of the Board .....

10. (a) Result of last examination : ..... (b) Percentage .....

11. Subjects proposed to offer : 1. .... 2. ....  
3. .... 4. .... 5. .... 6. ....

12. Whether the transfer certificate is attached YES/NO : ..... Date of T.C.....

13. Mother Tongue ..... Home town.....

### DECLARATION BY THE PARENTS

I hereby declare that the above information furnished by me is correct to the best of my knowledge & belief. I shall abide by the rules of the school.

Sign. of Parent/applicant



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## FOR THE OFFICE USE ONLY

Admitted to Class..... Section ..... Fee Receipt No .....

Date .....issued.

Name has been entered in the Class Attendance Register :. Yes  No

Certified that all the entries have been made in the Scholar's Register and the dues have been received.

Registration No. of the student in Admission Withdrawal Register is .....Vol. ....

Date: .....

Office Suptd.

Admission considered by the school is in accordance with the provisions of the Board & approved.

Date: .....

Sign. of Principal/Official Seal