

DESTINATION SUCCESS

(English Medium Co-Educational Sr. Sec. School Affiliated to CBSE, No. 1230022) With Full Boarding & Day Schooling

Salt Village, B.P.O. Khongjom, Manipur-795 148, India Phone No. 09615965922, 09856835024 E-mail: slopelandpublicschool@yahoo.com

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1 stamp & 3 Passport Size Photo graphs

ADMISSION FORM

Respected Sir/Madam, Please admit my son/daughter/ward to be a BOARDER/DAY SCHOOLAR in your school for the session				
Name of the child (IN CAPITAL LETTERS)				
Date of Birth: Sex: Male/Female Caste:				
Complete Address:				
*				
P.O:				
Identification Mark:				
	(Enclose a copy)			
	•			
	(2)			
	(5) puri/Fine Arts			
	ub/Vocational Stream:			
Tada do Janes de La Caracteria de La Car	uo, vocationai Stication in			
STREAM (FOR CLASS XI & XII ONLY)	·			
Details of last School Attended (for new students):				
Details of fast School Attenued (for new students).				
Name of School:	Medium of Instruction:			
Name of the Exam. Passed: Year: Roll N	Io: Board/School:			
Registration No. & year:				
Responsibilities discharged/exceptional achievement:				
Interest & Hobbies:				
Medical history of the child (has been child suffered from any major illness: YES/NO:				
(Disclose related document if chronic disease, for proper caring by the school)				
FAMILY INFORMATION				
Father Name:	Mother Name:			
Qualification:	Qualification:			
Aadhar No.	Aadhar No.			
Occupation:	Occupation:			
Residential Address:	Residential Address:			
Post Office: District:	Post Office: District:			
Phone No:	Phone No:			
E-mail:	E-mail:			
Phone No. (Whatsann)	Phone No. (Whatsann)			

Brother/S	Sister who may visit the student			
	Name	Age	Relationship with the student	
Name of t	the persons to be contacted in c	ase of emergency:		
	-		the child:	
			& (3)	
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I Certif	fy that:			
(i)	The information give	abide by the scho	n Form is complete and accurate. I do ol rules and regulation given in the from time to time.	
(ii)	In spite of normal precaution taken by the school, any mishap accident or injury occurs during the period of my ward, stay in the school or if and when on educational tours, excursion tours, excursion or camps, we will not hold the institution of the staffs responsible for it.			
Signa	nture of the Student		Signature of the Parent/Guardian	
Name:			Name:	
Date			Relation with the child:	
		For School Use	<u>e only</u>	
Admission Test Report/Marks Detail		<u>Detail</u>	Conducted on:	
a		36 36 1		
	<u>ubject:</u>	<u>Max. Mark</u>	<u>Marks obtained</u>	
	Inglish:			
	Ianipuri:			
	Aathematics: General Science:			
G	reneral Science:			
S	pecial Remarks, if any:	•••••		
••		•••••		
••	••••••	•••••	•••••••••••••••••••••••••••••••••••••••	
<u>D</u>	Occuments enclosed (Original)	<u>)</u>		
	1	2		
	Admission No:		Receipt No:	
	Admission Class:-		Section:	

House Allotted: -----

Admission Granted/Rejected Principal