



ST. JOHN'S SCHOOL

BALLIGUDA, KANDHAMAL DIST., PIN-762103, ODISHA

COR NO: PLB-021/2018, PLB-003/2019

APPLICATION FORM FOR NEW ADMISSION

2024-2025

Please affix
Passport size
Photograph of
the student

Please complete each section in **BLOCK LETTERS** using Black /Blue Ink

Section 1: CHILD'S PERSONAL DETAILS

| | | | | |
|--|----------------------------|---------------|--------------------|--|
| Student's Name | Father's Name | | | |
| | Mother's Name | | | |
| Date of Birth | Place of Birth | | | |
| Nationality | Male | | Caste | |
| Religion | Female | | Blood Group | |
| Local Address | Mother Tongue | | | |
| | Any Other Languages | | | |
| Permanent Address | | | | |
| Parent's Telephone Numbers | Residence | Mobile | | |
| | | Office | | |
| Last School Attended | | | Class | |
| Name and classes of any brother(s)/sister(s) already attending the school | | | | |

Section 2: ACADEMIC DETAILS

| | |
|---|--|
| Class in which admission is sought | |
|---|--|

Declaration:

I, _____ (Parent(s)/Guardian(s) hereby certify to the best of my knowledge that the above information is true and accurate. I understand that in the event that any information found to be false or misleading, the applicant can be disqualified and all the fees paid to towards the school admission of the child can be waived.

Date

Place

Signature of the Father/Mother/Guardian

➤ **ENCLOSURES** (All the following documents are Mandatory at the time of Admission)

- | | |
|---|---|
| <input type="checkbox"/> Birth Certificate | <input type="checkbox"/> Vaccination Card Copy |
| <input type="checkbox"/> Transfer Certificate (Original Copy) | <input type="checkbox"/> Blood Group Report |
| <input type="checkbox"/> Passport size photos of child (6) | <input type="checkbox"/> Residence Certificate or Residence proof |
| <input type="checkbox"/> Joint Passport size photos of parents (2 each) | |
| <input type="checkbox"/> Aadhaar card copy of parents and child | |
| <input type="checkbox"/> Community Certificate (SC & ST) | |

Please note: Staple all documents on the top left-hand corner of the Admission Form

**CONFIDENTIAL
FOR OFFICE USE ONLY**

To the class teacher,

Admit to class.....

Admission No.

Date of Birth

Date

Class Teacher

Assigned to Class Teacher.....

Roll No..... Dated.....

Principal