# SISHYA PLAY SCHOOL, HOSUR

## (A Unit of Sishya Educational Trust, Hosur)
### Thally Road, Hosur – 635 109 (T.N)
### Ph no: 8903194702,9488130702
Website: www.sishyaschool.edu.in  e-mail: sishya_hs@yahoo.com

## PRELIMINARY REGISTRATION FORM 2024 -25
## CLASS: LKG

| S.NO | PARTICULARS | DETAILS |
|---|---|---|
| 1 | **Name of the pupil** | |
| 2 | **Date of Birth** | |
| 3 | **Residential Address** | |
| 4 | **Name of the Father** | |
| | a)    Educational Qualification | |
| | b)    Designation | |
| | c)    Office Address | |
| | d)    Annual Income | |
| | e)    Phone No | |
| | f)    Email  id | |
| 5 | **Name of the Mother** | |
| | a)    Educational Qualification | |
| | b)    Designation | |
| | c)    Office Address | |
| | d)    Annual Income | |
| | e)    Phone No | |
| | f)    Email  id | |
| 6 | **Name of the Guardian( if applicable)** | |
| | a)    Educational Qualification | |
| | b)    Designation | |
| | c)    Office Address | |
| | d)    Annual Income | |
| | e)    Phone No | |
| | f)    Email  id | |

| 7 | a) Gender(M/F) | |
|---|---|---|
| | b) Nationality & state | |
| | b) Religion | |
| | c) Category (OC/BC/SC/ST/OTHER) | |
| 8 | **Mother Tongue** | |
| 9 | Whether brother /sister is studying in Sishya | (if yes) |
| | Yes ☐ No ☐ | Name: |
| | | Class/Sec: |
| 10 | Whether Parent is an Alumnus of Sishya | (if yes) |
| | Yes ☐ No ☐ | Name: |
| | | Batch Year: |
| | | % of marks obtained in class X: |
| 11 | Whether Parent is working currently in Sishya | (if yes) |
| | Yes ☐ No ☐ | Name: |
| | | Designation: |
| 12 | Whether the child is physically challenged or has any special needs (Attach Medical Certificate) | |

### *DECLARATION BY PARENT(S)*

I/ we hereby certify that the above information provided by me/us is correct and I/we understand that if the information is found to be incorrect or false, the ward shall be automatically debarred from selection/ admission process without any correspondence in this regard. I/We also understand that the application/ registration/short listing does not guarantee admission to my ward. I/We accept the process of admission undertaken by the school and I/we will abide by the decision taken by the school authorities. I/We understand that no reasons are expected for non-selection of my ward from the school authorities.

Signature of Father                                                                 Signature of Mother

For **office use** only

Selected ☐

Not-Selected ☐                                                       Signature of Correspondent