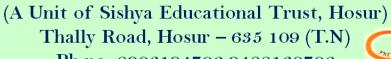
SISHYA PLAY SCHOOL, HOSUR



Ph no: 8903194702,9488130702

Website: www.sishyaschool.edu.in e-mail: sishya_hs@yahoo.com

PRELIMINARY REGISTRATION FORM 2022 -23 CLASS: LKG

| 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. | | | | |
| | | | | |
| Si | gnature of Father | Signature of Mother | | |
| For <u>office use</u> only | | | | |
| Selected | | | | |
| | Not-Selected Signature of Correspondent | | | |
| | Signature of Corresponden | | | |