



ST JOSEPH PUBLIC SCHOOL
 N R Pura, Chikmagalur, Karnataka - 577134
 Ph : +919448982159, Email:sjpsnrpura@gmail.com

**APPLICATION FOR PRIMARY REGISTRATION
 GENERAL INFORMATION**

Grade: _____ Application No: _____

Affix a recent
 passport size
 photograph of Mother

1. Name as per birth certificate/passport (IN BLOCK LETTERS) (This will be maintained in all school records)

(First Name)	(Middle Name)	(Last Name)

2. Gender: Male Female 3. Date of Birth (in figures)

d	d	m	m	y	y	y	y
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Date of Birth (in words) _____

4. Nationality _____ 5. Aadhaar No: _____

6. Religion _____ Caste _____ SC ST OBC General (if SC/ST Provide Documents)

7. Mother Tongue _____ 8. Identification Mark: _____

9. Blood Group _____ 10. Allergies (if any) _____

11. Father's full name/Guardian's name (As per proof attached) 12. Mother's full name/Guardian's name (As per proof attached)
 (This will be maintained in all school records) (This will be maintained in all school records)

_____ _____
 Educational Qualification _____ Educational Qualification _____

_____ _____
 Profession/Designation _____ Profession/Designation _____

Residence Address _____

Phone No. (Office) _____ Phone No. (Office) _____

Mobile No. _____ Mobile No. _____

E-mail _____ E-mail _____

One mobile number to which SMS may be sent _____

13. Does your child have any disability: Yes No

14. Any evidence of learning disability/Special Attention: Yes No (Please attach full details if any)

15. Siblings in St. Joseph Public School: _____

16. Parents living Together Separated Divorced

If Divorced or separated, with whom does the child live? _____

17. In case of Guardian, relationship with the student _____

18. Residence Address of the Guardian _____

19. Contact No: _____ E-mail _____

ACADEMIC RECORD

20. School last attended _____ 21. School Code _____

22. Disc Code: _____ TC No: _____ Board ICSE CBSE State Board

23. Reason for withdrawal _____

24. Whether school Transportation is required : Yes No

I/We certify that the information I/We have provided in this application form is correct to the best of my/our knowledge.

Signature of Father / Guardian

Affix a recent
passport size
photograph of Father

Affix a recent
passport size
photograph of Mother

Signature of Mother

Date of submission

d	d	m	m	y	y	y	y
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Signature of the Principal: _____

Date: _____

Office Use:

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