

SALT LAKE POINT SCHOOL

CD-249, SALT LAKE, KOLKATA-700064

AFFILIATED TO ICSE/ISC NEW DELHI

(Application for Registration on the waiting list for admission)

1. Name of Student (in full) _____
(Capital Letters)
2. Sex Male/Female
3. Date of Birth _____
(Please attach birth certificate)
4. Father's Name _____
5. Mother's Name _____
6. Registration requested for class _____
7. Class & School studying at present _____
8. Medium of instruction in the present School _____
9. Nationality of Parents _____ Child _____
10. Religion: Father _____ Mother _____ Child _____
11. School (s) & College (s) attended by Father _____
(Please state medium of instruction & qualifications)
12. School (s) & College (s) attended by Mother _____
13. Occupation of Father _____
14. Occupation of Mother _____
15. Gross Monthly Income of Family _____
16. Second Language to be Studied – Hindi/Bengali Mother Tongue _____
17. Extra-curricular interests of the Child, (Games, hobbies, etc., attach certificate if any)

18. The Child is the eldest/middle/youngest Child _____
(Please give particulars-sex and ages of Children)
19. Whether any own brother/sister of the candidate is presently studying in this school. (if YES, give details)
 - 1) Name _____ Class _____
 - 2) Name _____ Class _____

RECENT
PHOTOGRAPH

2.5cmX3.5cm

Dear Sir,

Please register my child's name on the waiting list for admission for the academic year beginning in April, 200.....

I have read the School Rules and I agree to abide by the rules in all respects and I also accept that they may be changed from time to time without notice.

I hereby confirm that the above information's are true to the best of my knowledge and belief.

Yours faithfully,

Date _____

Signature of Father _____

Signature of Mother _____

Signature of Local Guardian _____

Name & Address _____

Telephone Nos. (Res.) _____ Office _____

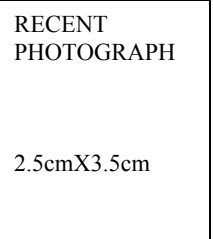
Note:

1. The registration of a child's name on the waiting list does not carry with it the guarantee of admission
2. Please attach two 2.5cmX3.5cm size photographs along with this form, as mentioned.
3. **Medical Information**

In the interest of the student, the guardian should inform the School about specific physical and psychological problems which the student had suffered or is suffering. Any disability which would prevent the student from taking part in sports, games and P.T. should be mentioned. (Attach doctor's certificate)

COUNTER FOIL

ADMIT CARD



Name of the child _____

Please submit the completed Registration form by _____
along with following documents/photocopies to the office :

- a) Official Birth Certificate for the verification and a Xerox copy of the same record.
- b) Transfer Certificate from the School last attended.

Names of those called for interview will be put up on the Notice Board on _____
This registration form should be filled up properly. Incomplete forms may be rejected. Candidates who do not bring this counter foil to the interview will be disqualified.

c) Candidates, whose documents (i.e. Birth certificate from Corporation/Municipality/ Panchayat and Report card, Transfer Certificate, Migration Certificate, etc.) are not in proper order, or the registration form is not filled in properly, will not be eligible for admission test/interview.

Signature of the Official Staff

School Stamp

Date