



SWARGARANI SCHOOL & PU COLLEGE

B.E.M.L. Layout, Rajarajeshwarinagar, Bengaluru - 560 099
Tel : 2861 6306, 2861 6826, 2861 6115 E-mail : swargarni_school@yahoo.com

ADMISSION FORM

Office use only.

Affix Family Photograph
with Gum or Paste only
Do not staple

Affix Student
Photograph
with Gum
or Paste only
Do not staple

- Name of Pupil (In BLOCK LETTERS):
- Sex: (Male / Female) Nationality: Mother Tongue:
- Religion: Caste: (SC/ST/OBC/General)
- Date of Birth: DD MM YY
{In Words
- School Last Attended:
- Standard in which admission is sought:
- Residential Address:
..... Telephone No.:

- | | |
|--|--|
| 8. Father's Name & Occupation:
Office Address with Telephone No.
.....
.....
..... | 9. Mother's Name & Occupation:
Office Address with Telephone No.
.....
.....
..... |
|--|--|

Father's Education: Below SSLC / SSLC / PUC / Graduate / Post Graduate / Mphil / PHD Details:	Mother's Education: Below SSLC / SSLC / PUC / Graduate / Post Graduate / Mphil / PHD Details:
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- Transfer Certificate No.: Date:
- Sibling's
 - Name: Class: Admission No.:
 - Name: Class: Admission No.:

- Certified:
 - That the above particulars are correct and I agree to abide the rules and regulations of this institution and accept the charges (if any) there in at later stage.
 - The date of birth as entered above is correct according to the evidence available with me.

N.B.:

- After the admission formalities are over, any fees paid in respect of him/her will not be refunded either partially or fully under any circumstances.
- Text - Books, Note Books and Uniform are issued by the school.

Date: _____ Signature of Mother _____ Signature of Father _____

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Admission granted to: Class: Division:

Admission No.:

Date of Admission :

Signature of Principal