



# H. S. MEMORIAL SCHOOL

Karma Complex, Baksha, Hooghly, Near Dankuni

ACADEMIC SESSION : 2021-2022

## REGISTRATION FORM

Form No. :

APPLICATION FOR ADMISSION TO CLASS \_\_\_\_\_

 APPLICANT  
PASSPORT  
SIZE PHOTO

### APPLICANT INFORMATION

Applicant First Name : \_\_\_\_\_ Applicant Last Name : \_\_\_\_\_  
 DOB : \_\_\_\_\_ Gender : \_\_\_\_\_  
 Blood Group : \_\_\_\_\_ Mother Tongue : \_\_\_\_\_  
 Nationality : \_\_\_\_\_ Religion : \_\_\_\_\_  
 Second Language : \_\_\_\_\_ Aadhar Number of the Applicant : \_\_\_\_\_  
 Class applying for : \_\_\_\_\_

### PRESENT SCHOOL CLASS DETAILS

Last Institution : \_\_\_\_\_ Presently Studying in Class : \_\_\_\_\_  
 Last Institution Address : \_\_\_\_\_

### RESIDENTIAL ADDRESS

Address : \_\_\_\_\_  
 District : \_\_\_\_\_ Area : \_\_\_\_\_  
 Police Station : \_\_\_\_\_ State : \_\_\_\_\_  
 City : \_\_\_\_\_  
 Pin Code : \_\_\_\_\_ Phone Number : \_\_\_\_\_

### FATHER DETAILS

Father's Name : \_\_\_\_\_ Father's Mobile Number : \_\_\_\_\_ PHOTO  
 Father's Alternate Number : \_\_\_\_\_ Father's Email ID : \_\_\_\_\_  
 Father's Occupation : \_\_\_\_\_ Father's Company Name : \_\_\_\_\_  
 Father's Office Address : \_\_\_\_\_ Father's Annual Income : \_\_\_\_\_  
 \_\_\_\_\_ Father's Aadhar Number : \_\_\_\_\_

### MOTHER DETAILS

Mother's Name : \_\_\_\_\_ Mother's Mobile Number : \_\_\_\_\_ PHOTO  
 Mother's Alternate Number : \_\_\_\_\_ Mother's Email ID : \_\_\_\_\_  
 Mother's Occupation : \_\_\_\_\_ Mother's Company Name : \_\_\_\_\_  
 Mother's Office Address : \_\_\_\_\_ Mother's Annual Income : \_\_\_\_\_  
 \_\_\_\_\_ Mother's Aadhar Number : \_\_\_\_\_

### GUARDIAN DETAILS

Relationship with Applicant : \_\_\_\_\_ Guardians Name : \_\_\_\_\_  
 Guardians Mobile Number : \_\_\_\_\_ Guardians Alternate Number : \_\_\_\_\_  
 Guardians Email ID : \_\_\_\_\_ Guardians Occupation : \_\_\_\_\_  
 Guardians Company Name : \_\_\_\_\_ Guardians Annual Income : \_\_\_\_\_  
 Guardians Aadhar Number : \_\_\_\_\_

Signature of Parents

**TRANSPORT DETAILS**

Avail transport facility ? : No \_\_\_\_\_ Area of boarding : \_\_\_\_\_  
 Landmark : \_\_\_\_\_ Distance from school (in KM.) \_\_\_\_\_

**SIBLING DETAILS****CONTACT PERSON (IN CASE OF EMERGENCY)**

Contact Person Name : \_\_\_\_\_ Relationship with Emergency Contact Person : \_\_\_\_\_  
 Emergency Contact Person Mobile Number : \_\_\_\_\_ Contact Person 2 Name : \_\_\_\_\_  
 Relationship with Emergency Contact Person 2 : \_\_\_\_\_ Emergency Contact Person 2 Mobile Number : \_\_\_\_\_

**DECLARATION/DISCLAIMER****Undertaking**

We have gone and understood the terms and condition of admission for my ward and we hereby declare that all statements made in this application and all attached documents are true, complete and correct in all respect. We undertake to abide by the rules and regulations of the instituton. We declare that our ward is medically fit in all respect. We shall not hold the school authorities responsible if anything happens to our ward as a result of his/her medical condition. We further agree to pay the prescribed fees timely that will not be refunded or adjusted in any way by the school authority.

Date : \_\_\_\_\_ Signature of Father \_\_\_\_\_ Signature of Mother \_\_\_\_\_ Signature of Guardians \_\_\_\_\_

**FOR OFFICE USE**

Session : 2021-2022

Name : \_\_\_\_\_

Admit in Class \_\_\_\_\_ ID No. : \_\_\_\_\_

Admission No. \_\_\_\_\_ Date of admission \_\_\_\_\_

\_\_\_\_\_  
 Signature  
 (Head of the Institution)

\_\_\_\_\_  
 Signature  
 (Dealing Assistant)

**Admission Requirement :**

2 pcs. Colour photo (Candidate stamp size)  Birth Certificate  TC  Aadhar Card  Report card of last class attended   
 Certificate  Social Category other than General  BPL  First Page of Bank Pass Book.

**ADMISSION TEST**

Date : \_\_\_\_\_

Admission test for class \_\_\_\_\_ in which the student seeks admission. Date \_\_\_\_\_

Qualifying for admission \_\_\_\_\_

Principal Signature and Date

Examiner's Remark : \_\_\_\_\_

Signature \_\_\_\_\_