

JOHN TODDLERS' HOME

No. 26/1, Ring Road, Kengeri Satellite Town, Bangalore-560 060

Phone : 080-28484090

(Affiliated to ICSE, New Delhi)

REGISTRATION FORM

1. NAME OF THE APPLICANT:
2. DATE OF BIRTH: IN WORDS:
3. NATIONALITY RELIGION CASTE: SC / ST / GENERAL/OBC
- MOTHER TONGUE
4. a) PARENT(S) NAME: FATHER MOTHER
- b) OCCUPATION:
- c) ADDRESS:
- d) CONTACT NUMBER
OFFICE:
RESIDENCE:
MOBILE :
5. STANDARD IN WHICH THE APPLICANT IS STUDYING: II Language III Language
6. STANDARD AND YEAR FOR WHICH ADMISSION IS SOUGHT:
7. a) ANY SISTERS OR BROTHERS STUDYING IN THIS SCHOOL: YES NO
- b) IF YES, MENTION THE NAME AND STANDARD:
- c) WHETHER PARENTS ARE OLD STUDENTS: YES NO YEAR
8. ANY SICKNESS OR PHYSICALLY HANDICAPPED? IF SO, GIVE DETAILS:
9. ENCLOSED COPY OF THE BIRTH CERTIFICATE AND LATEST PROGRESS REPORT: YES NO
- NOTE: REGISTRATION DOES NOT GUARANTEE ADMISSION**

DATE:

SIGNATURE OF THE PARENT / GUARDIAN

REMARKS :

PRINCIPAL'S SIGNATURE