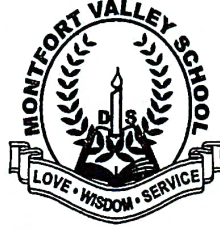


Sl.No.



Ph : 04868 247421  
 04868 247799  
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# MONTFORT VALLEY SCHOOL

*Affiliated to CBSE, New Delhi, No.931106*

**Montfort Vihar, Murickumthotty, Idukki District, Kerala- 685619**

## APPLICATION FORM FOR ADMISSION KINDERGARTEN

1. Full Name of the Pupil  
(IN BLOCK LETTERS)

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2. Sex

Male/Female

D

M

Y

3. Date of Birth

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4. a) Nationality .....  
 b) State to which the Pupil belongs .....  
 c) Mother Tongue .....
5. a) Religion .....  
 b) Caste:ST/SC/MBC/BC/OC .....  
 c) Aadhar No .....  
 d) Account No. of the Student .....
6. a) Name of the Father .....  
 b) Name of the Mother .....  
 c) Educational Qualifications .....  
 d) Occupation .....  
 e) Annual Income .....  
 f) Status of the Ration Card (Whether APL/BPL) Put Tick Mark

- g) Permanent Address .....
- h) Telephone No. ....
7. a) Name of the Guardian: .....
- b) Relationship with the Guardian .....
8. Class to which admission is sought
9. Do you require Transport Facility Yes/ No
- If Yes, point of boarding .....

10. I, ..... Father of .....  
do hereby declare that the particulars in this form are true to the best of my knowledge and also that I have read the rules and regulations of the School and that I undertake that my son/ daughter will abide by them. I further declare that the date of birth of my son / daughter given above is correct and that I will not apply in future for the correction of the date of birth.

**I understand that the fee once paid is neither adjustable nor refundable**

Date :.....

Station :.....

**SIGNATURE OF PARENT/GUARDIAN**

..... **FOR OFFICE USE** .....

**ENCLOSURES:**

1	Birth Certificate	2	Community Certificate
3	Student's Photograph (Passport size 2 Nos)	4	Remarks

- 1. Interview/ Examination Date** :.....
- 2. Date of selection** :.....
- 3. Fee receipt No& Date** :.....
- 4. Admission No & Date** :.....

**Admitted/ Not Admitted**

**SIGNATURE OF THE PRINCIPAL**