Form	No

Registration No.....

## MONAL PUBLIC SR. SEC. SCHOOL



## SANJAULI SHIMLA - 171006(H.P.)

(Ph. No. 0177- 2841265) (Affiliated to H.P.Board of School Education Dharamshala)

## ADMISSION FORM FOR 10+1 & 10+2

Recent Passport size photograph of the student

1.	Name of the Student (in bloc	k letters) :							
2.	Father's Name (in block lette	ers) :							
	Occupation	:							
3.	Mother's Name (in block lett	ers) :							
	Occupation	:							
4.	Student Aadhaar No	:							
5.	Date of Birth (Please attach doct	umentary evidence	e in support, viz Birth Certifi	icate issued by the Munic	ripal Authorities or transfer				
	certificate from previous school atte	ended etc.)							
	a) In figure	:	D D / M	M / Y Y	Y Y				
	b) In words	:							
6.	Sex (Male / Female)	:							
7.	Category (Gen./SC/ST/OBC)	:							
8.	a) Address for correspo	ndence :							
	b) Telephone No.	:	office	officeResi					
c) Permanent Address									
9.	Last School Attended	:							
10.	Particular of last examination	n passed:-							
	Class Passed Marks	Obtained	Maximum Marks	Percentage	Name of Board from				
					which exam. Passed				
	· I		1	1	, ,				

Note:- Please Attach

- i. Copy of marks sheet Matric / 10+1
- ii. Migration certificate(in case from another board)

iii. Transfer Certificate

iv. Character Certificate

11.	Stream	n offer	red: - Arts/Humanities							
Compulsory Subjects				C	ptional Subj	ects (Tick A	ny One)			
		1.	English Core		1.	Computer	Science			
		2.	Economics							
		3.	Political Science		2.	Physical I	Education			
		4.	History							
12.	Were y	ou pre	viously admitted to this School?	Yes			No			
13.	13. Medical data of student:-									
	a)	Blood	l Group							
	b)	Any I	Medical History							
	c)	Any l	kind of handicap							
			<b>DECL</b> A	ARATION	<u> </u>					
1.	I do hei	eby so	plemnly declare, affirm and accept that	the inform	nation g	iven above is	true to the be	est of my		
knowledge and brief.										
2.	I promi	se to a	bide by all the rules and regulations of	f the school	l.					
3.	I under	take to	pay the dues of my ward regularly as	they fall du	ue.					
4.	I under	take to	indemnify the school all accident dur	ing its routi	ine fund	ctioning of act	tivity that the	school authorities		
	may pro	escribe	for the children.							
Da	te	•••••				Si	ignature of P	Parents/ Guardia		
			FOR OFFIC	CE USE C	ONLY					
	Date o	f recei	pt of application							
Certifie	d that a	pplica	tion is in order and the Birth Certific	ate / Trans	sfer Ce	rtificate of the	e school atte	nded last has been		
attache	d herewi	th of t	he father/ guardian has promised to pro-	oduce the o	original	certificate(s)				
Recom	mended	for adı	mission							
	1.						<b>~</b> :	c		
Admitte	ed to cla	ss					Signat			
						Se	enior Assistai	nt (ADMISSION)		