St. Ephrem Seminary Public School
Schion Nagar, Vettickal P.O, Mulanthuruthy -682314
Ernakulam Dist., Kerala. (Affiliated to CBSE New Delhi No:930749) Ph: 0484-2749549, 2738303, 2261200



APPLICATION FOR ADMISSION 2020-21

1. Name of Pupil in	full (block letters)			
2. Sex		Male	Female	
3. Date of Birth	In figures			
	In words			
4. Age as on 01-06-2019		Years	Months	Days
5. Identification ma	nrks		<u>l</u>	
6. Nationality				
7. Mother Tongue				
8. Religion & Caste				
9. Does the candidate belong to OBC, OEC/SC or ST, if so, specify				
10. Whether living with parents or guardian				
11. a) Name and address of Father/guardian				
b) Occupation of Father/guardian				
c) Official address of Father/guardian Phone No. (if any)				
12. a) Name of Mother				
b) Occupation & official address of Mother & Phone No. (if any)				

13. Annual Income of the Family	
14. Class to which admission is sought	
15. Name of School attended in the Previous year (if any)	
16. Is the previous school recognised by the government	
17. Class attended in the previous year	
18. Whether qualified for promotion	
19. Whether case/mark sheet attached	
20. Whether transfer certificate is attached, if yes, write the No. and date of Transfer Certificate	
21. Medium of instruction in the previous year	
22. Whether brothers or sisters studying in this school, if so name & class	
23. Extra curricular activities, if any	
24. In case of emergency, contact Ph. No.25. Bus Boarding Point	
DECLA	ARATION
hereby declare that the statements given about	ent / guardian of
Station:	Signature of Father/Mother/Guardian
FOR OFFIC	CE USE ONLY
Date of admission	Admission No:
Standard to which admitted	