



PRABHATH RESIDENTIAL PUBLIC SCHOOL, KARIMUGAL
BRAHMAPURAM.P.O, ERNAKULAM. 682303
(Affiliated to CBSE No.930414)

Issue of Registration form does not ensure admission.

Please paste a recent passport size photo graph of child in this space

REGISTRATION FORM – ACADEMIC SESSION 2019-20

For Office use only

Registration Form No.

Receipt No.

Please tick if applicable : Staff ward NRI General

Please register the name of my son/daughter / ward for admission to your school.

Admission to class :

1. Child's Name (in block letters) :

2. Gender (Please tick) : Male Female

3. Date of Birth : DD MM YYYY

4. Age as on 31st March 20.. :yearmonths

5. Nationality of the child :

6. Whether belongs to SC/ST/OBC : Yes No

7. Residential address with complete

Postal address & Tel. No(s) :

8. Father's Name(Block letters) :

a) Academic Qualifications :

b) Occupation & Designation :

c) Office Tel.No(s) :

d) Mob.No :

e) Email. :

f) Name & Address of the Organisation where employed :

Please paste a recent passport size photo graph of child's father in this space

- 8. Mother's Name(Block letters) :
- a) Academic Qualifications :
- b) Occupation & Designation :
- c) Office Tel.No(s) :
- d) Mob.No :
- e) Email. :
- f) Name & Address of the Organisation where employed :

Please paste a recent passport size photo graph of child's mother's in this space

CHILD PROFILE

- Child's Surname :
- Legal Name :
- Chosen Name :
- Post code :
- Date of Birth :
- Tel.No. :
- Mob.No. :
- Email. :
- Birth certificate seen : Yes No
- Previous Nursery School attended :
- Child's position in family :
- Please indicate any other children in family : Boys..... Ages.....
Girls..... Ages.....
- Home language :
- Religion & Caste :
- Is English is spoken as the 1st language at home : Yes No

MEDICAL INFORMATION

Height :(Date.....)

Weight : (Date.....)

Blood Group :

Does your child suffer from any disease? Asthma Yes No

Allergies Yes No

Any other disease Yes No

Kindly specify:

Date:

Place:

Signature of Parent

Address to which communications
to be sent with phone No. :

Class to which admission is sought :

Bus stop for boarding (if required) :

Office use only

Verification of date : Yes No

Selected for admission :

Date:

Principal