Form No. .....

LOURDE MATA CONVENT SCHOOL

Sehore, Badiyakhedi

REGISTRATION FORM

1. (a) Name of the Student _____

   (in block letters) first Name Surname

   (b) Sex : Male/Female

   (c) Date of Birth _____ (In words) _____

   _____

   (d) Mother Tongue _____ Religion _____ ST/SC/OBC/GEN. _____

2. Class to which admission is sought _____

3. Name of the Previous School _____

   Please attach a copy of the report card of class attended

4. Reason for change of school _____

5. Whether own brother/sister is studying in this school Yes No

   If Yes 1. Name _____ Class _____

   2. Name _____ Class _____

6. (a) Father's Name _____

   (b) Profession & Designation _____

   (c) Residential Address _____

   _____ Tel. No. (Res.) _____

   (d) Office Address _____

   _____ Tel . No. (Off.) _____

   (e) Mother's Name _____

   (f) Is the mother of the child working ? yes No

   If yes, Profession _____ Education Qualification _____

   Office Address _____ Tel. No. _____

Signature of the Parent/Guardian
Name of block letter