

THE SCHOLAR SCHOOL

EDUCATION MEETS EXCELLENCE

Bahour Main Road , Korkadu Villianur, Puducherry 605005 www.thescholarschool.org.in

APPLICATION FOR ADMISSION

Note: Application defective in particulars or in any other manner will be rejected

Application No	: Admission No	Date of A	Admission :	
1. Name of the (BLOCK LETTERS	applicant in full as given in t	he Birth Certificate	Affix	
			Student	
2. Date of Birth		Age: s of June 2024)		
4.Nationality :	5. Gender :	M F		
6. Native : 7. Blood Group :		8. Mother To	8. Mother Tongue :	
9. Religion :	10. Community :			
11. Class to which admission is sought :		12. Academia	12. Academic year :	
13. Student's Aac	lhaar Number :			
14. Class & School	ol Last Studied :			
15. State Whethe	r:			
a. Physically Har	ndicapped :Yes No			
b. Allergies if any				
•	lth Problem (Please Specify)			
16. Identification	Marks 1			
	2			
17. Name of the	Father :			
18. Occupation	:		Affix	
19. Official Addre	ess:		Father	
20. Annual Inco			Photo	
21. Contact Num				
22. Email Id :	23. Fath	ner's Aadhaar Number :		

24. Name of the Mother :	
25. Occupation:	Affix
26. Official Address :	Mother
27. Annual Income :	Photo
28. Contact Number : Office : M	1obile :
29. Email Id : 30. N	Nother's Aadhaar Number :
31. Name of the Guardian (option):	
32. Occupation:	Affix
33. Official Address :	Guardian
34. Annual Income :	Photo
35. Contact Number : Office :	Mobile :
36. Email Id : 37. Guardian's Aadhaar Number :	
38. Address for Communication :	
39. Present Address :	43. Permanent Address : Same
40. City: State:	44. City : State :
41. Country:	45. Country :
42. Landline Number :	46. Landline Number :
47 Plages enseifuths intended made of t	remanant for your child.
47. Please specify the intended mode of t	
Parent Guardian	Auto-Rickshaw School Transport
Note : Please	enclose the following
i. Original Birth Certificate & Transfer Certificate	_
ii. Photo Copies of Community Certificate & A	
iii. Medical Records of Student	
DEC	LARATION
·	e correct to the best of my knowledge and that I have
	rus and assure to abide by the rules of the school.I am rmation or by supression of facts will be cancelled on
detection at any time.	, , , , , , , , , , , , , , , , , , ,
Place:	
Place:	Signature or thumb

Guardian