



St. JOSEPH GLOBAL SCHOOL

By Sisters of DMI

MOTHER VIRGIN GARDEN, DEVARKULAM, MANUR,

TIRUNELVELI - 627 951.

PH : 94443 90712 Website : www.sjgsdkm.in

Email : dftdmidevarkulamsch@dmifoundations.org

APPLICATION FOR ADMISSION

ACADEMIC YEAR 20 - 20

PRE-KG TO X

Affix recent passport size photo

A. INFORMATION OF THE CHILD

Name of the PUPIL (Capital Letters only)

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Gender

Date of Birth

Age

Blood Group

Male Female

DD	MM	YYYY
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Religion

Roman Catholic

Caste

Nationality

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Yes NO

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Community

Aadhar No.

OC BC MBC SC ST SS BCM Others

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Languages Known

Mother Tongue

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RESIDENTIAL ADDRESS

TEMPORARY ADDRESS

Father's Mobile No. _____
E-Mail ID : _____

Mother's Mobile No. _____
E-Mail ID : _____

Distance from school (in kms) : Preferred Phone Number for school SMS :

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Emergency Contact No. (Res/Mobile)	Name of the person to be contacted	Relationship

Do you require bus facility? Yes No

If yes, boarding point. _____

B. FAMILY INFORMATION

Single Parent

Tick one, only if applicable Father or Mother

Father / Guardian:

Name:	Age:	Nationality:
Educational Qualification:	Institution:	
Occupation:	Office Address:	
Designation:		
Annual Income:	Mobile No.:	

Mother / Guardian:

Name:	Age:	Nationality:
Educational Qualification:	Institution:	
Occupation:	Office Address:	
Designation:		
Annual Income:	Mobile No.:	

Details of Brothers / Sisters of the student

Name	Age	Name of the Institution	Standard

Incase of Staff's ward:

Name of the Parent:

C. DETAILS OF PREVIOUS STUDY

Year	Name of the school Studied	Standard / Grade	Grade / Marks obtained in final exams

The Previous School affiliated to : STATE BOARD CBSE ICSE Other

Awards won so far in Sports, Arts, Academics, etc...

D. MEDICAL DETAILS OF THE CHILD

Any Medication taken for general well-being of the child.

Any medication taken for any medical condition, such attention deficit / thyroid (hypo / hyper) / any other condition.

Does the child have any difficulty in seeing? Yes No

Any Consultation with doctor done: Yes No

If yes, Explain : _____

Any Allergy / any medical information that school should be aware of:

E. ENCLOSURES (All documents are mandatory at the time of admission)

- Birth Certificate Photocopy
- Transfer Certificate Original
- Community Certificate Photocopy
- Passport size photo (5 copies)
- Aadhar Card Photocopy
- Vaccination Card Photocopy (if required)
- Progress Report Photocopy - Previous year (only for new admission from other schools)
- Transport From (if required)

The above documents (recently attested photocopies) must be produced along with the filled application from

Please Note : Staple all documents to the left-hand corner of the application

How did you hear about our school?

Name of the Newspaper Name of the Magazine Website Other

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F. DECLARATION

I _____ have the authority to admit my child / ward _____ , into the school as the parent / legal guardian. I undertake the responsibility of providing any evidence needed to support the information provided here, if necessary for any reason. I declare that the statements provided in this application are correct to my knowledge and if found otherwise. I shall abide by the decision of the management. I agree to abide by the rules, regulations and the fee structure of the school.

Date of Submission:

Place:

Signature of Parent / Guardian

DMII
FOR OFFICE USE ONLY

Master / Miss / Baby : _____

Standard / Grade / Class: _____

Group : _____

Date : _____

Admission Co-ordinator

Principal