

ST. ANTONY'S MATRIC. HR. SEC. SCHOOL

Recognised by the Govt. of Tamil Nadu

No.1, Velachery Main Road, Pallikaranai, Chennai – 600 100.

Phone: 4356 0602, 6459 2555 E-mail: stantonystantony@gmail.com

Affix Photo

Website: stantonys.school

APPLICATION FORM FOR ADMISSION

Si.No:	Date :	Admn.No:
1. Name of the pupil	:	
2. Date of Birth	:	
3. Nationality and State to which the pupil belong	:	
4. Religion	:	
5. Caste & Category	:	
AL – Anglo Indian SC – Scheduled Caste ST – Scheduled Tribe SS – Christians Convert SN – Christians who are MB – Most Backward c OB – All Other Backwar OC – All Other Commun	e not converted from SC lasses ed classes nities	
Whether living with pa and local residence if r with parent or guardia	not living	
7. a) Name of the Parentb) Occupationc) Full Address	& Qualification :	
d) Telephone No. / Cel	l No. :	
8. a) Name of the Guardi b) Occupation c) Full Address	an & Qualification :	

d) Telephone No. / Cell No.

9. a) Standard last studied, Name of school last attendedb) Whether qualified for promotion	: :			
10. Whether Transfer Certificate of the Elementary school leaving certificate & (or) record sheet is attached			(original)	
11. Class into which admission is sought	:			
12. Mother tongue of the pupil	:			
13. Language proposed to be taken under second language	:			
14. Protection from small pox : whether vaccinated or small pox marked	:			
15. Previous school history of the pupil	:			
16. a. Is Birth Certificate enclosed	:	☐ Yes	□ No	
b. Birth Certificate No.	:			
17. a. Is Community Certificate enclosed	:	□ Yes	□ No	
b. Community Certificate No.	:			
18. Is Bus Pass required	:	□ Yes	□ No	
19. Health wise special care if needed	:			
I declare that the above statement is correct and that the pupil has not attended any other school besides those mentioned above.				
I declare that I will not ask for a change in Date of Birth in future				
STATION:			Signature of the Parent / Guardian	

SELECTED / ADMITTED / NOT ADMITTED

For office use only:

Remarks by the Principal