

## MGM PUBLIC SCHOOL

## Admission Form

S.R	tegister No Date						
I the Father / Mother (Name) request you to admit my son/ daughter/ ward in your school.							
1.	Admission sought to : Class						
2.	Student's Name:						
	Sur Name First Name						
3.	Date of Birth : 4. Sex: Male Female						
(in figures) D D M M Y Y Y Y							
	(in words)						
5.	Age as on 1st April: Years Months Days 6. Nationality						
	Parents Information						
7.	Father's Name Occupation						
	Designation Qualification Annual Income (Rs.)						
	Office Address						
	Mobile No. Phone (R) Phone (O)						
8.	Mother's Name Occupation						
	Designation Qualification Annual Income (Rs.)						
	Mobile No. STD Code Phone (O)						
9.	Local Guardian's Name						
	Relation with student						
10.	PresentAddress PresentAddress						
	Contact No.						
11.	Permanent Address						
	Contact No.						

12.	Last Scho	ool attended by the S	Student [			
	Class		City			
13.	Details of any real brother or sister studying in MGM:					
	Name of	Student	Class			
	1					
	2					
			Health	Information		
Alle	ergy if any		1.		Blood Group	
,y	outor proc	non regarding near				
			Un	dertaking		
(1)						
(0)				n regarding the stude	ent is true to our b	est knowledge.
(2)		school dues will be p				
(3)	We shall	abide by the rules ar	id regulatio	ons of the school.		
						. 0: .
					Par	ents Signature
Date	e					
Plac	ce					
			Admi	ssion Order		
The	student		is gra	anted admission to cl	ass	provisionally
fors	session					
Enc	closed -	1. Transfer Certificat	e of the las	t School		
	:	2. Date of Birth Certif	ficate			
	;	3. Report Card of the 4. Two Passport size	last Schoo	ol.		
	•	4. TWO F as sport SIZE	priolograp	лю.		
Dat						Dringir -1
Date	e:					Principal



## MGM PUBLIC SCHOOL

## Transportation Form

S. Register No.	-	Date	
Name			
Class	Sec		
Date of Birth :	_(in figures):	(in words) :_	4
Father's Name :			
Father's Profession / Occupation :		F	-
Phone No./ Mobile No. :	-		
Mother's Name :			
Mother's Profession / Occupation :	y		
Phone No. / Mobile No.) :	•••		
PresentAddress:			-
PermanentAddress :			
Name of the Vehicle		2	
Name of the Stoppage			95