

Registration cum admission form

Recent Photograph

Registration form no.		/				
Admission sought in class	Play Group / Nursery/ J.K.G. /S.K.G./ Grade 1/					
Full Name of Kid(In block le	tters)					
Any sibling studying or studi	ed at MLS (Name):					
Gender of Kid	Baba/Baby	Blood Group	A	В	C	
			(Kid)	(Mother)	Father)	
Date of Birth(dd/mm/yy)	Date of B	irth(In words):				
Place of Birth	State	e				
Nationality	Whether belongs to SC/ST/OBC/Handicapped					
Language for Communicatio	n at home					
Father's Name	Qualification					
	Profession	Location				
Mother's Name		Qualificatio	on			
	Profession	Location				
Contact Details:-						
Full Address						
Contact Details	R	o	M_			
SMS alert mobile no.		2				
Emergency contact No.	1					
E-mail		2				
Required Enclosures:						
Birth Certificate (Zerox) 2. Pa	ssport Size Photograph – 3	Nos. 3. Photograph of Paren	ts			

Application for Admission

Respected Manager,		
I would love to apply for the admission in Grade my child	e in the academic year	foi
I understand the fact that acceptance of this appropriately to abide by the rules laid by the school author	plication is left entirely to the discretion of the school authorities.	orities. I wil
Yours faithfully,		
[Signature of Mother]	[Signature of Father]	
[o.g. attace of mounts]	[0.8	
Note: Incomplete forms will be rejected.		
Date :		