



Photo

Affiliated to CBSE, Delhi: 931015 | An ISO 9001 : 2015 Certified Institution
 0490 2397377 | +91 8086 388 806 | www.mountguideinternational.org
 PERINGATHUR - KANNUR

Admn. No:

Date of Admission:

Name :
 (In block letters)

Sex : Male Female: Blood Group:

Date of Birth : Age: Months:

Identification Mark :

Admission Sought to:

Place of Birth :

Nationality : Religion: Caste:

Father's Name :

Qualification : Occupation:

Mother's Name :

Qualification : Occupation :

Residential Address :

District:

Pin :

Telephone :

Permanent Address :

Pin :

Telephone :

Mobile Number : Father :

Mother:

Name & Address of Local Guardian (if any) :

Telephone :

Student

UID Number Father

Mother

Previous School Details :	Grades	Period
1. <input type="text"/>	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>	<input type="text"/>

No. and date of Transfer Certificate Produced on admission

Scholastic Achievements if any:

.....
.....

Sports / Games / Activities:

.....
.....

Health and Physique : History of allergies, asthma, epilepsy, diabetes or other major illness or physical / learning disabilities should be noted here.

.....
.....

Character - any specific areas where counselling is needed:

.....
.....

Reason for joining Mount Guide International:

.....
.....

Declaration of the Parent

I understand and accept the rules and regulations of MOUNT GUIDE INTERNATIONAL and am ready to admit my ward in the school.

Signature : Father Mother Guardian

Office Use Only

Needs Vehicle : Yes No Is eligible to class:

Remarks if any :
.....
.....

Signature of HM Principal's Signature

Payment Details :

Date of Admission :

Signature of Accountant

Signature of Executive Director

