



ARAFA ENGLISH SCHOOL, ATTUR

SENIOR SECONDARY

AFFILIATED TO CBSE, NEW DELHI NO. 930181
ARAFA NAGAR, ATTUR P.O, THRISSUR DIST, PIN 680 592
Ph : 04884-274595, 274695, 274995 Fax: 04884-274485

E-mail: arafaschool@gmail.com Website: arafatrust.com

APPLICATION FOR ADMISSION

FORM NO

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Passport size
Photo to be
affixed

1. Name of the Pupil (In capital letters) :

(In Malayalam) :

2. Sex

M	F
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 :

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3. Date of birth(In figures) : dd

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 mm

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 yy

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(In words).....

4. Place of Birth :Nationality :

5. Religion & Caste :Category (SC/ST/OBC):

6. Handicapped (Blind / Deaf / Handicapped, Dyslexic, Spastic)

7. Details of Parents/Guardian :

Particulars	Father	Mother	Local Guardian (If Father is not the Guardian)
Name			
Permanent Address			
Occupation			
Address for Communication			
Phone			
E-mail			

8. Identification Marks :

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9. Details of T.C Produced.

Name of school Previously attended	T.C No and Date	STD to which Admission is sought	Remarks

10. Testimonials attached

1.

2.

3.

10. Details of Brothers/ Sisters Studying in this School

Sl No	Name	Admn.No	Class with Div
1			
2			
3			
4			
5			

11. a) Are you related to ARAFA Trust? If Yes furnist details with signature.

Name of the Member	Status on Membership			Relationship with pupil
	Patron	life	Trust	No.&Date

b) Details of Privileges :

Recommending : Sponsoring Both: Sibling

No. of changes availed

Signature

DECLARATIONS

I.....hereby undertake that on being admitted I shall abide by the rules and regulations of the school and that I will do nothing either inside or outside the school that will interfere with its orderly working and discipline

(Signature of the candidate)

If my son/daughter wardis admitted to the school, I undertake to see to his/her good conduct and disciplined, behaviour inside and outside the school. I also undertake to pay all fees and liabilities to the school as and when due.

(Signature of Parent/Guardian)

Recommendation of the selection committee

Order of the principal

Principal

FOR OFFICE USE

Admitted to STD :

Admission No :

Date of Admission :

Fees Paid.....

No of Children Sponserd Recommended Both Own

Signature of section clerk