

JYOTHI NIVAS KINDERGARTEN

UC College PO, Aluva 683 102. Phone: 0484 2609468. Email: jyothinps@rediffmail.com

Registration Form for Admission to Kindergarten

PHOTO

Reg. No.

(Please use CAPITAL LETTERS for names. Form is to be filled by the parents only. Name, Date of Birth & Sex should be same in Aadhaar and Birth Certificate. **Submit a copy of Aadhaar & Birth Certificate**)

Scholar's Name:

Aadhaar No.

Date of Birth (Day/Month/Year):-

Place of Birth:

Sex:

Phone No. :

Mobile No. :

Address.....

Admission sought for class :Mother tongue

Religion : Caste/Community Category

Information about Parents (if orphan about guardian):

| | Father / Male Guardian | Mother /Female Guardian |
|-------------------------------|------------------------|-------------------------|
| Name & (Age) | | |
| Educational Qualifications | | |
| School attended | | |
| College attended | | |
| Professional courses attended | | |
| Occupation & Designation | | |
| Office address & Phone no. | | |
| Income per month | | |

Jyothi Nivas Public School, Aluva

Reg. No..... Date & time of Interview/ Test;

Name:..... DOB.....

Admission sought for class:

Signature of the Clerk

Information about child's siblings: (Not cousins)

| Name | Age | Name of the School / College | Class |
|------|-----|------------------------------|-------|
| | | | |
| | | | |
| | | | |

1. Give brief information about your family.

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2. State 3 reasons for choosing this school for your child.

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4. Does your child have toilet training? Yes/ No , If no why?

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5. Does your child require help for eating food? Yes / No

6. Are both parents able to discipline your child? If only one why?

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7. Do you have sufficient time to spend and listen to your child daily? Yes / No

Date:

Signature of the Father / Mother/ Guardian

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