



GODSON PUBLIC SCHOOL

(CBSE AFFILIATION CODE NO:1930368)

6, Surapet Main Road, Thirumal Nagar, Chennai-600 099.

Phone :044 25656611,25654565

APPLICATION FORM FOR THE ACADEMIC YEAR 20 - 20

(To be filled in by the office)

Application No :

Date of Issue :

Admission No :

Admission to Class :

Please
affix recent
passport size
photo
(in formal dress)

A.APPLICANT'S INFORMATION

Name(IN BLOCK LETTERS)

Gender

M F

Date of Birth

Day Month Year

Blood Group

(Original Birth Certificate and also a photocopy to be attached for L.K.G and only photocopy for other Classes)

Nationality

Mother tongue

State

Caste

Religion

Community(for statistical purpose only)

SC ST BC MBC OC

Residential Address :

Phone:

Mobile:

Email :

Name of Schools the child attended. Begin with the first year of schooling.

Class	Name of the school	Medium of instruction

Any Brother(s)/Sister(s) presently studying in our School?

(If yes, please fill in the particulars)

Class	Name	School

Second Language from I-VIII - Tamil/Hindi(Compulsory)

Third Language from V-VIII - Tamil/Hindi/Sanskrit(Compulsory)

Activities:

1.(Please state all representations in National / State / Distric / Divisional / Zonal Levels in Sports , literar , cultural events)

Activity	Level	Postion held / Type of Participation / Awards	Year
eg: foot Ball zonal	Zonal	Winner	2007
1.			
2.			
3.			
4.			
5.			

2.If special talents possessed,specify :

B.PARENT'S INFORMATION

Information related to the parents

Particulars	Father	Mother
Name		
Address of the employer/organization		
Type of industry / Business / Designation		
Annual income		
Educational Qualification		
Office Phone Number		
Mobile Number		
E-mail ID		

Contact details in case of emergency

Name	<input type="text"/>	Address	<input type="text"/>
<input type="text"/>			
Phone Number	<input type="text"/>	Mobile Number	<input type="text"/>

Have you submitted Transfer Certificate (yess/no) if not, mention the
Along with this application? date of possible submission

(original should be produced on confirmation of admission)

Whether transport facility is required Yes Distance from residence (km):

(Please Confirm the availability of the transport with the school office)

If yes,specify the boarding point

Note:Admission and school transport are possible only if you are within 5Km radius. This will enable you to get the full benefit of the school transport.

If you are not within 5Km radius of the school,you are asked either to make your own arrangement or engage the private van operators.

Declaration

- ★ I hereby declare that the above statement are correct and true to the best of my knowledge and belief.
- ★ I declare that i will not ask for a change in the date of birth and community in future.
- ★ I hereby also agree to to abide by the rules and regulation in force and those, that may be framed from time in future including the rules related to fee.

Please
affix Father's
recent
Passport size
Photo

Signature of the Father

Please
affix Mother's
recent
Passport size
Photo

Signature of the Mother

Please
affix Guardian's
recent
Passport size
Photo

Signature of the Guardian

C. GENERAL INFORMATION

How did you become aware of the GODSON SCHOOL? (Please tick)

- | | |
|--|---|
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Through ex-students |
| <input type="checkbox"/> Through relatives | <input type="checkbox"/> Student Presently Studying |

What are your expectation from the GODSON SCHOOL?

(State in order of priority by Providing serial Numbers)

- | | |
|---|--|
| <input type="checkbox"/> Top Quality Education | <input type="checkbox"/> State-of-the-art Infrastructure |
| <input type="checkbox"/> Specialized coaching, exposure and encouragement in sports | <input type="checkbox"/> Communication skills |
| <input type="checkbox"/> Extra Curricular Activities | <input type="checkbox"/> Uniformed Services |
| <input type="checkbox"/> General Discipline | |

D. OFFICE USE ONLY

Entrance Test marks detail

Eng	Lang	Math	Sci/Phy	Chem	Bio	His	Geo	Total	Percentage

Interview Details.....

Admitted in Standard Section

Second Languages (Please Tick) :Tamil Hindi

Third Languages (Please Tick) :Snaskrit Tamil Hindi

Date

Certificates	Wheather enclosed	Xerox	Original	SI.NO&Date of certificate
1.Transfer Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>
2.Birth Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>
3.Mark Statement	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>
4.Community Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>

Certificate Verified,found correct & filed

H.M / A.H.M.

Principal