



Godson Public School  
*wise men store up knowledge*

# GODSON PUBLIC SCHOOL

(Affiliated to CBSE, New Delhi - Code No. : 1930368)

No. 6, Surapet Main Road, Thirumal Nagar,

Chennai-600 099. Ph : 044-25656611

email : godsonchennai@gmail.com, website : www.godsonpublicschool.edu.in

## APPLICATION FORM FOR THE ACADEMIC YEAR 20 - 20

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

Blood Group

Day   Month   Year

(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 :

**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 of the School	Medium of instruction

**Second Language from I - IX - Tamil / Hindi (Compulsory)**

**Third Language from I - IX - Tamil / Hindi / Sanskrit (Compulsory)**

**Activities :**

1. (Please state all representations in National / State / District / Zonal levels in Sports, literary, cultural events)

Activity	Level	Position held / Type of Participation / Awards	Year
eg. : Foot Ball	Zonal	Winner	2011

2. If Special talents possessed, specify :

## B. PARENT'S INFORMATION

**Information related to 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 along with this application ? ☐ (Yes / No )if not, mention the date of possible submission

(Original should be produced on confirmation of admission)

Whether transport facility is required ☐ Yes ☐ No

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 5 km radius. This will enable you to get the full benefit of the school transport.

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

### Declaration

- ☆ I hereby declare that the above statements 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 abide by the rules and regulations in force and those, that may be framed from time to time in future including the rules related to fee.

Please  
affix Father's  
recent  
passport size  
Photo

Please  
affix Mother's  
recent  
passport size  
Photo

Please affix  
Guardian's  
recent  
passport size  
Photo

Signature of the Father

Signature of the Mother

Signature of the Guardian

### C. GENERAL INFORMATION

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

- ☐ Advertisements ☐ Through ex-students
- ☐ Through relatives ☐ Student's presently studying

What are your expectations from the GODSON SCHOOL?  
(State in order of priority by providing serial numbers)

- ☐ Top Quality Education ☐ State-of-the art infrastructure
- ☐ Specialized coaching, exposure and encouragement in sports ☐ Communication skills
- ☐ Extra Curricular Activities ☐ Uniformed Services
- ☐ General Discipline

### D. OFFICE USE ONLY

Entrance Test Marks detail :

Eng	Lang	Maths	Sci/Phy	Bio	Hist	Geo	Total	Percentage

Interview Details.....

Admitted in Standard  Section

Second Languages (Please Tick) : Tamil ☐ Hindi ☐

Third Languages (Please Tick) : Sanskrit ☐ Tamil ☐ Hindi ☐

Date:

Certificates	Whether enclosed	Xerox	Original	Sl.No. & Date of Certificate
1. Transfer Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
2. Birth Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
3. Mark Statement	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
4. Community Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

Certificates verified, found correct & filed

H.M./A.H.M.

Principal