



NOTRE DAME HOLY CROSS HIGH SCHOOL

M o h a r p a r a

Estd. 1992 Affiliated to CBSE
North Pulinpur, Teliamura – Moharpara Khowai, 799203

REGISTRATION FORM

ALL DETAILS TO BE WRITTEN IN BLOCK LETTERS

To,

The Principal
Holy Cross School
Moharpara, North Pulinpur,
Teliamura, Khowai Tripura - 799203

Sir,

I would like to register the name of my ward for admission to your school for the current academic session.

1. Name of the Candidate: _____

2. Date of Birth : _____ Place of Birth _____

3. Sex : _____ Religion: _____ Mother tongue: Community: Gen / OBC/ Sc/ ST

4. Class to which Admission is sought: _____

5. Class last attended : _____

6. School last attended: _____

7. Father's Name : _____ Mother's Name: _____

Qualification : _____ Qualification _____

Occupation (Specify) _____ Occupation (Specify) _____

Monthly income : _____ Monthly income: _____

ADDRESS: RESIDENCE: _____ OFFICE : _____

Tel : _____

Mobile: _____

SIBLINGS:

Do you have any other child studying in this school? _____

If yes, Name: _____ Class _____

Date :

Signature of Parents

REGISTRATION FORM



NOTRE DAME HOLY CROSS HIGH SCHOOL

M o h a r p a r a

ADMISSION FORM

ALL ENTRIES SHOULD BE WRITTEN IN BLOCK LETTERS

- Name of the Pupil in full:
2. (a) Sex: Male Female (b) Religion..... Community.....
(c) Nationality..... (d) Mother tongue..... (e) Whether SC/ ST/ OBC/ General
3. Place of Birth
4. Date of Birth in figures / in words
5. Father's name in full
- (a) Qualification
- (b) Occupation (Specify)
- (c) Monthly income
6. Mother's name in full
- (a) Qualification
- (b) Occupation (Specify)
- (c) Monthly income
7. Full Address
- (a) Residence : Phone (b) Office: Phone
- (c) Mobile
8. Name of Guardian
- Address.....
9. Person / Doctor to be contacted in case of emergency
- phone
10. Class to which admitted Second Language
- (a) Class last attended School last attended
- (c) Name of brothers / Sisters / if studying in this school 1) Class
- 2) Class3) Class.....

DECLARATION BY THE PARENT

I hereby apply for admission of my said wards to the above mentioned class and declare that the statements made herein are all true to the best of knowledge. I further declare that I am aware of the rules and regulation of Notre Dame Holy Cross high School, Moharpara and shall follow these rules and other such rules & regulations the management may frame from time to time. I undertake to regularly pay all the fees and charges of my ward as may be decided by the school authorities. I shall not apply for the change of the date of birth of my ward under any circumstances. I understand that fees once paid are not refundable.

Signature Of Mother

Signature of Principal

Signature of Father

ADMISSION FORM