

St. JOSEPH INTERNATIONAL SCHOOL By Sisters of DMI

Mother Virginnamal Garden, South Venganallur Village, Thirunelveli Road, Rajapalayam - 626 117. PH: 97509 43911 Website: www.sjisrjp.in Email: dftdmirajapalayamsch@dmifoundations.org

Affix recent passport size photo

APPLICATION FORM - XI

ACADEMIC YEAR 20 - 20

Registration No. (For Office use only)

			J			
1	Name of the Pupil (I As Per Class X Admi					
2	Gender:	Male / Female	0)			
3	Date of Birth :	a) In Figures				
		b) In Words	407			
4	or Scheduled Tribe (for Statistical purp					
5	Whether living with parent or guardian (if living with guardian - reason)					
6	Annual Income / Of b) Mother's Name Qualification / Occu	pation / Designation / fice Address & Phone No. pation / Designation / fice Address & Phone No. ess & Phone No.	ATIONS 984			
7	a) Residential Addre	ignation / Office Address				
8	Details of Siblings st (Own Brothers / Sis	cudying in this institution ters only)	Name: Relationship: Class:	Sec:		
				(P.T.O)		

9	Name of the School and Address (Presently studying in Class X)											
10	Level of Maths subject appearing / appeared in Class X Board Exam			Standard Maths / Basic Maths								
11	Group wish to opt Tick any one			S1 - English, Physics, Chemistry, Maths, Computer Science S2 - English, Physics, Chemistry, Maths, Biology C1 - English, Business Studies, Accountancy, Economics, Maths C2 - English, Business Studies, Accountancy, Economics, Computer Science								
12	Marks/ Grades Scored in 10th	Language (Specify)	English	Maths	Science	Social Science	Total	Percentage				
I do, hereby declare that the particulars given above are true. If any of the above particulars are found not to be true. The admission may be cancelled. I also agree that T.C. may be issued whenever either parent of the student makes a request for withdrawal. Signature of the student Station: Date:												
 Issue of the Application form or Registration does not guarantee allotment of seat or admission to the class. Self - Attested photocopies to be attached with the application (i) Transfer Certificate, Marks Statement, Conduct Certificate, Community Certificate and Migration Certificate and Birth Certificate												
	FOR OFFICE USE ONLY											
Adm	ication No: ission No: er of the Pri	nciple: Admi	it to Std	Standard: Medium of Instruction: In Group above (Vide No. 19)								
Date	Date: Signature of the Principal											