



# WISDOM INTERNATIONAL PUBLIC SCHOOL

Khargapur (Near Lalkothi) Gomti Nagar Ext. - 226010  
Cell: +0522-3512493, Mob.: 8887-906068  
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## ADMISSION FORM

Admission Form for Session 20\_\_\_\_ - 20\_\_\_\_

Admission Form No. 071

Date : \_\_\_/\_\_\_/20\_\_\_\_

Admission sought for Class \_\_\_\_\_

(USE CAPITAL LETTERS ONLY)

1. Students Name \_\_\_\_\_  
2. Father's Name \_\_\_\_\_  
3. Mother's Name \_\_\_\_\_  
4. Date of Birth \_\_\_\_\_  
5. Aadhar Card No. \_\_\_\_\_  
6. Category SC/OBC/ST \_\_\_\_\_ 7. Caste \_\_\_\_\_  
8. Religion \_\_\_\_\_ 9. Sex(Male/Female) \_\_\_\_\_  
10. Permanent Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Correspondence Address : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Phone \_\_\_\_\_ Mobile : \_\_\_\_\_

13. Mother Tongue \_\_\_\_\_ Nationality \_\_\_\_\_

14. Class and School in he/she has been studying in the last School :

Name of School \_\_\_\_\_

Class \_\_\_\_\_ Medium \_\_\_\_\_

Transfer Certificate/School leaving Certificate \_\_\_\_\_

15. Single Child (Only Boy / Only Girl) \_\_\_\_\_

16. Particulars of all Brothers/Sisters Study in same School :

S.No.	Name of the Child	Age	Class & Section
1.			
2.			
3.			

18. Any Physical Ailment \_\_\_\_\_

19. Any to Hobbies of you child (a) \_\_\_\_\_ (b) \_\_\_\_\_

20. Special Interest : \_\_\_\_\_

I certify that I am the parent/bonafide guardian of the child and information given in this forms is true to the best of my knowledge. I have carefully read the prospectus and agree to abide by the rules, regulations and procedures laid down there in and accept that they may change from time to time at the directions of the school management and extend my full co-operation to keep things moving in a healthy manner.

Signature of Mother \_\_\_\_\_

Date : \_\_\_\_\_

Signature of Father \_\_\_\_\_

Date : \_\_\_\_\_

### FOR OFFICE USE ONLY

#### TO BE ATTACH FOLLOWING DOCUMENTS :

- |   |                          |  |                          |
|---|--------------------------|--|--------------------------|
| 1. Attested Xerox copy of Date of Birth Certificate | <input type="checkbox"/> | 5. School leaving Cert./Transfer Cert. | <input type="checkbox"/> |
| 2. Photographs of Student                           | <input type="checkbox"/> | 6. Passing Certificate/Mark Sheet      | <input type="checkbox"/> |
| 3. Parent's Photographs                             | <input type="checkbox"/> | 7. Character Certificate               | <input type="checkbox"/> |
| 4. Attested Xerox copy of Aadhar Card               | <input type="checkbox"/> | 8. Attested Xerox Copy of SC/OBC/ST    | <input type="checkbox"/> |

Admission Form No. \_\_\_\_\_ Reg. No. \_\_\_\_\_ Admitted to Class \_\_\_\_\_

Date \_\_\_\_\_ Office Supdtt. \_\_\_\_\_ Section \_\_\_\_\_