

LITTLE FLOWER SCHOOL

The Council for the Indian School Certificate Examination, New Delhi.

Trimurty Road, Mulund (W), Mumbai - 400080. Mobile No.: 8591806080

REGISTRATION FORM

(To be filled in Block Letters)

Reg. No.

This is a Chris	tian Minority School, Managed by the S	sisters of the Congregation	of Jesus.
1) Name of the Pupil (In BLOCK LETTER	:—————————————————————————————————————		
2) Sex : Male			
			Family Photo
(Hindu, N	Auslim, Christian, Roman Catholic, Buddhist, Sikh	n, Jain, Parsi, Other)	
5) Caste : (if any) (SC/ST/OBC/SEBC		ste :	
6) Nationality :	Mot	ther Tongue :	
7) Date of Birth (in F	igures) :		
) Dute of Birth (iii i	Date Mon	nth Year	
8) Date of Birth (in v	vords) :		
	:		
	State :		
PARENTS INFORMATION		Country	
Parent's Detail	FATHER	MOTHER / GUA	ARDIAN
Name			
Educational Qualification			
Aadhaar Number			
Occupation			
Residential Address			
Mob. No.:			
Monthly Income			
PAN CARD			
Contact No.			
Email ID			
Marital Status			
	s you have been staying at the above ad other is studying in this Institution then g		
Name :1	Sto	d. : Div	
	Sto		
	evious School :		
here by certify that to found to be incorrect	he information provided by me is correct or false, then my ward shall be automandence in this regard.	t and I understand that if th	ne information
		Signature of the	• •
Regist	ration Form for Little Flower School L.	K.G./U.K.G. (Counter Foil)
Registration No. :	Admission sought in :		
			CHILD'S
	vith Surname which is compulsory)		РНОТО
3) Mother's Name :			
4) Sex : Male	Female		
5) Date of Birth (in Fig	gures) :		
	Date Month	n Year	
6) Interaction with Par	rents : Date : Time :		

7) Selection list will be put up on the school bulletin board on___

(This Counter Foil with the photo should be brought on the Day of Meeting the Child and Admission)