

**SACRED HEART SCHOOL
YERCAUD-636601**



Contact :- 04281-222236,222135

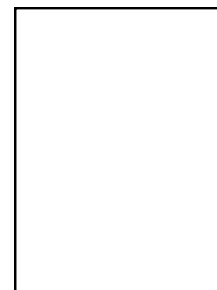
E-mail :- yercaudshy@gmail.com

Website:- www.shyschoolyercaud.com

REGISTRATION FORM FOR STANDARD XI

STUDENT DETAILS:-(TO BE FILLED IN BLOCK LETTERS)

1. Name of the Pupil : _____
2. Date of Birth : _____
3. Mother Tongue : _____
4. Religions : _____
5. Caste / Community : _____
6. Blood Group : _____
7. Aadhar ID : _____
8. EMIS Number : _____
9. E- Mail Id : _____



PARENT'S DETAILS :-

1. Father's Name : _____
Occupation : _____ (Govt/Private/Self-employed/Unemployed)
Monthly Income : _____
2. Mother's Name : _____
Occupation : _____ (Govt/Private/Self-employed/Unemployed)
Monthly Income : _____
3. PAN Number : _____

CONTACT DETAILS :-

1. Address for Communication : -

2. Mobile / Landline Number:-

ACADEMIC DETAILS :-

Name of the previous school with address :-
(Mention the State and Country)

Medium of instruction in the previous school:- _____

Syllabus followed in the previous school :- TN Common Syllabus/CBSE/ICSE/A.I./Any other

Second Language studied in the previous school :- _____

Second Language opted :- Tamil French

Group opted for :- _____

Group - I	Maths	Physics	Chemistry	Computer Science
Group - II	Maths	Physics	Chemistry	Biology
Group - III	Accounts	Commerce	Economics	Business Maths
Group - IV	Accounts	Commerce	Economics	Computer Application

Declaration and Signature

I declare that the statements given above are correct and that my daughter has not attended any other school besides the one mentioned above.

I hereby declare that the date of birth and the name of the candidate spelt, given above is correct and that no alternation or it will be demanded in future on the plea that the correct date of birth or name , was not given at the time of registration.

I also hereby agree that fees once paid to the school will not be refunded.

Date :-

Signature of Father

Signature of Mother

Principal