

BETHLAHEM HILLSIDE INTERNATIONAL SCHOOL

KARUNGAL, KANYAKUMARI DISTRICT – 629 157.

Please affix the Candidate's Photo here

REGISTRATION FOR PROVISIONAL ADMISSION

Sl. No.	Please affix the Father's Photo here	Please affix the Mother's Photo here		
Date :				
APPLICANT'S INFORMATION				
First Name Middle Name	Family Nam			
Date of Birth Date Month Year	Place of Bir	th		
Registration for Provisional Admission to Grade I / II / III / IV / V / VI / VII / VIII / IX				
1. Nationality				
2. Mother tongue				
3. Religion : Caste :				
4. Father's / Guardian's Name				
5. Father's Qualification : Primary Schooling Intermediate Graduation PG				
6. Mother's Name				
7. Mother's Qualification : Primary Schooling Intermediate Graduation PG				
8. Foster Father's Name if any				
9. Foster Father's Qualification : Primary Schooling Intermediate Graduation PG				
10. Occupation of Father / Guardian:				
11. Occupation of Mother:				
12. Income of Parent / Guardian per month :				
13. Blood Group :				
14. Child Vaccination given : Yes No				
15. Previous school attended if any				
16. Any academic difficulty (e.g.) Dyslexia, Dyscalculia, Dysgraphia, Dyspraxia: Yes No				
17. If yes, specify				
18. Marks secured in the previous school Examination (Attach an attested copy of the marks statement)				
19. School Leaving Certificate and (or) Record Sheet is attached Yes No NA				
20. Approx. distance from the school : less than 5-10 km 11-16 km 17-25 km 26 and above				

21. School Transport requi	ired :	Yes No
If yes, specify the boar	ding point	
22. Any Siblings studying	in this Institution :	Yes No Class studying
23. Interest in extracurricu	alar : Music Dance Sports	s Art
Any special training in	extracurricular activities:	Yes No
If yes, specify		
24. Contact Details / Resid	lential Address:	
Parent / Guardian 1		
Full Name		
Telephone : (Home)	(Business)	(Mobile)
Home address		
Parent / Guardian 2		
Full Name		
		(Mobile)
()		
DECLARATION		
neither transferable nor refund. Bethlahem Hillside Internation issued by the village or munic assisted the delivery of the chi	able. This application must be accompanial School" for a sum as per schedule and scipal authorities, or by head of the registe	ee admission to the school and that the registration fee is ited by cash or demand draft in favour of "the Principal a Xerox copy of the birth certificate of the candidate, as tered nursing home, or by the medical practitioner who ation number). We undersigned hereby verify that above littions of Enrollment and Admission.
Signature		
Name		
Relationship to Student		
Date	Place	
	FOR OFFICE USE (ONLY
The state of the s		
The second secon		
Name of Guardian:		
Eligible to be admitted:	Yes No	1
Assessed by:		
Remarks:		
Notes:		
Head of School / Principal		Admission Council