

Mettupalayam.

SRI VINAYAGA VIDHYALAYA Sr.Sec. SCHOOL

(Affiliated to CBSE - New Delhi. Affiliation No. 1930228)
113/4, Periyaranganathapuram, Bujanganoor (PO),
Karamadai - 641 113, Coimbatore (Dist).
Phone: 04254 - 284555, Cell: 99650 59241, 99430 26266
Email: info@svvs.in_website: www.svvs.in

Affix recent Passport size photograph (Taken note arlier than three months)

ADMISSION FORM STD XI)

(Please read the instructions carefully before filling up the form)

1.	Name of the Pupil	<u> </u>
	(Use capital letters as	1
	It appears in school records)	1
2.	Address for communication	<u></u>
		<u></u>
3.	Permanent Address	<u> </u>
		Phone No.:Mobile
4.	Sex	Male Female
		_
5.	(i) Nationality	:(ii) Religion
	(iii) Community	BC/OBC/SC/ST/
6.	Date of Birth	Date Month Year
7.	Father's Name	:
	Occupation	:
	Designation	:
	Office Address	:
	Phone No.	: MobileAnnual Income Gross
8.	Mother's Name	<u></u>
	Occupation	<u></u>
	Designation	<u></u>
	Office Address	<u></u>
	Phone No.	: MobileAnnual Income Gross
9.	Name of Guardian (If any)	<u>:</u>
	Occupation	:
	Designation	:
	Office Address	:
	Phone No.	: MobileAnnual Income Gross
1	0. Mother tongue of the pupil	·

he pupil :			
Year	of Passing	Syllabus (State Board/CBSE/ICSE)	Marks & Percentage obtained
ol)	ired: Ye	es No.	
equired	Ye	es No.	
1A :	English, Ph	ysics. Chemistry, Biology,	Mathematics
1B :	English, Ph	ysics, Chemistry, Informati	cs Practices, Mathematics
1C :	English, Ph	ysics, Chemistry, Biology,	Informatics Practices
II A :			siness Studies,
IIB :			siness Studies,
II C			
:	:		
	DECLAR	ATION	
, the admiss urnished is o	sion may be rej correct and I ha	ected outright and action mave read all the rules and re	ay be initiated against us.
		Sign	ature of Parent / Guardian
the time of	admission		
the time of (Original)	fadmission		
	f admission		
(Original)	f admission Birth Certific	ate	
(Original) Card and	Birth Certific	ate USE ONLY	
(Original) Card and	Birth Certific		
(Original) Card and	Birth Certific	USE ONLY	
(Original) Card and	Birth Certific	USE ONLY	
	Year Year Year It is a second or sequired It is a seco	Year of Passing Year of Passing Ation required: Year Pequired Year A : English, Ph B : English, Ph C : English, Ecc Informatics B : English, Ecc Mathematic B : English, Ecc Entreprene C : English, Ecc Entreprene C : English in Ecc Entreprene	Year of Passing Syllabus (State Board/CBSE/ICSE) Syllabus (State Board/CBSE/ICSE) Syllabus (State Board/CBSE/ICSE) Syllabus (State Board/CBSE/ICSE) No. Pation required: Yes No. 1A : English, Physics. Chemistry, Biology, Information of the sylvanian of th

APPROVED / REJECTED

Date: PRINCIPAL CORRESPONDENT

SRI VINAYAGA VIDHYALAYA Sr.Sec. SCHOOL

CBSE
Managed by
NKR Rani Mahal Trust
Mettupalayam

(Affiliated to CBSE - New Delhi. Affiliation No. 1930228)
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ADMISSION FORM

Photo with Date

S.N	O.				
Adn	nission No		To be filled b	by office	
CLA	ASS to which admission soug	ht :		Session :	
PER	RSONAL DETAILS :-	Autl	horised Signatur	e :	
1.	Name :				
2.	Gender : Male	Female	Any	other	
3.	D.O.B : Date	Month	Year		
	In words:				
	(Attach Date of Birth Certifi	cate issued by the C	Competent Autho	rity)	
4.	Details of parents :-				
	Details	Mot	her	Father/G	uardian
	Name				
	Educational Qualification				
	Residential Address				
	E-mail				
	Occupation				
	Official Address				
	Phone No.				
	Parents Aadhar No.				
	Annual Income:				
5.	Whether the candidate is:- (i) Single Girl Child: (ii) Specially abled: (iii) Belonging to the EWS (Attach proof wherever appl		Yes Yes Yes		No No
6.	Category: (Attach proof): G	eneral SC	ST O	OBC E	WS
7	Aadhar No. (Mandatory) (A	ttach proof)			_

Class Last attende	ed			
. Is Vaccination give		Yes		No.
. Previous last school	ol affiliated with			
(i) CBSE	(ii) ICSE	(iii)	IB	
(iv) State Board . Result of last class	(v) Any others:	er (please specify)		
Subject	Maximum Marks	Marks obtained	% of Marks	Remarks
1				
	te No :			
Transfer Certification Date of Issue :	te No :			
Transfer Certification Date of Issue:	te No :s (if any)			
Transfer Certificate Date of Issue : Details of siblings	s (if any) Brother/Siste			
Transfer Certificate Date of Issue : Details of siblings Name hereby declare the uardian's Name, Mo	s (if any) Brother/Siste	CLARATION action including If Birth furnished by	School studying in School studyi	n andidate, Fath
Transfer Certificate Date of Issue : Details of siblings Name hereby declare the uardian's Name, Mo	Brother/Siste DEI at the above informather's name and Date of the standard by the standard b	CLARATION action including If Birth furnished by	School studying in School studyi	n andidate, Fath
Transfer Certificate Date of Issue : Details of siblings Name hereby declare the uardian's Name, Moy knowledge & belief	Brother/Siste DEI at the above inform other's name and Date of the shall abide by the state of	CLARATION action including I f Birth furnished by rules of the School	School studying in School studyi	n andidate, Fath the best of
Transfer Certificate Date of Issue : Details of siblings Name hereby declare the uardian's Name, Moy knowledge & belief	Brother/Siste DEI at the above inform other's name and Date of the shall abide by the state of	Age CCLARATION The properties of the School Signature of the signature	School studying in School studying in School studying in School S	andidate, Fath the best of

Central Board of Secondary Education