



CENTRAL GOVERNMENT EMPLOYEES EDUCATION SOCIETY'S HIGH SCHOOL
SEC-VII, CGS COLONY, S M PLOT ANTOPHILL, MUMBAI 400037

ADMISSION FORM

Student ID No.

Student UID No.(AADHAR No.)

GR No.

S.NO

DATE OF ADMISSION:

FULL NAME OF THE STUDENT

MOTHER'S NAME

NATIONALITY

MOTHER TOUNGE

SEX

RELIGION

CASTE

SUBCASTE

CATEGORY

PLACE OF BIRTH VILLAGE/CITY

TALUKA

DISTRICT

STATE

COUNTRY

DATE OF BIRTH (According to Christian era)

DATE O BIRTH (In Words)

RESIDENTIAL ADDRESS

PERMANENT ADDRESS

FATEHER'S NAME

QUALIFICATION

OCCUPATION

DESIGNATION

OFFICE ADDRESS

ANNUAL INCOME

MOBILE NO

MOTHERS'S NAME

QUALIFICATION

OCCUPATION

DESIGNATION

OFFICE ADDRESS

ANNUAL INCOME

MOBILE NO

GUARDIAN'S NAME

QUALIFICATION

OCCUPATION

DESIGNATION

OFFICE ADDRESS

ANNUAL INCOME

MOBILE NO

PARENT'S/GUARDIAN'S EMPLOYED IN

NAME OF THE LAST SCHOOL ATTENDED

DATE OF LEAVING

STANDARD FOR WHICH ADMISSION SOUGHT

DETAILS OF SIBBLINGS PRESENTLY STUDYING IN CGEES HIGH SCHOOL

1. NAME

STD

DIV

2. NAME

STD

DIV

3. NAME

STD

DIV

HEALTH DETAILS (CERTIFICATE NO. & DATE)

BLOOD GROUP

HEIGHT

WEIGHT

SMALL POX VACCINATION

POLIO VACCINATION

TRIPLE ANTIGEN

BCG

MISSILE RUBELLA

I HEREBY AGREE TO ABIDE BY THE RULES OF THE SCHOOL AND FURTHER CONFIRM THAT THE ABOVE PARTICULARS ARE TRUE AND CORRECT.

DATE:

SIGNATURE OF PARENT/GUARDIAN

FOR OFFICE USE ONLY

ADMISSION TEST CONDUCTED ON

PASSED/FAILED

ADMITTED IN STANDARD/DIV

DATE OF ADMISSION

RECEIPT NO.

AMOUNT PAID

CHECKED BY

HEAD MASTER/MISTRESS

STUDENT	FATHER	MOTHER
---------	--------	--------