

**(Recognised by Govt. of Tamil Nadu)**

**30, Ramachandra Road, Nehru Nagar, Chrompet,Chennai-600 044.**

**Ph: 044- 2223 5761, E-Mail : scsmatric.hr.sec@gmail.com**

**Website : www.scs-schools.org**

Photo

|  |  |  |  |
| --- | --- | --- | --- |
| Date of Reg. |  |  |  |
| Admission. No. |  | | |
| Class |  | | |

**APPLICATION FORM FOR ADMISSION IN STD XI – XII**

**ACADEMIC YEAR 2016 - 2017**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. Name of the Student (in Block Letters) |  | | | | | |
| 2. Date of Birth & Age |  | | | | | |
| 3. Mother Tongue & Nativity / Religion |  | | | | | |
| 4. Does the pupil belong to SC/SC/BC/OC ? |  | | | | | |
| 5. Particulars of Parent /Guardian  ( Please specify the designation (or) nature  of work in detail) | Father | | | Mother | | |
| a. Name |  | | |  | | |
| b. Educational Qualification |  | | |  | | |
| c. Designation |  | | |  | | |
| d. Annual Income |  | | |  | | |
| e. Residential Address |  | | | | | |
|  | | | | | |
| f. Phone Number |  | | |  | | |
| g. Email ID : |  | | |  | | |
| 6. Class and group in which admission is  sought |  | | | | | |
| 7. Furnish the Previous School history of the  student . | Year | Class | Medium | | | School |
|  |  |  | | |  |
| 8. Name of the Board |  | | | | | |
| 9. Register No / Year of Passing | Subjects | | | | Marks obtained | |
|  | Language | | | |  | |
| English | | | |  | |
| Maths | | | |  | |
| Science | | | |  | |
| Social Science | | | |  | |
| TOTAL | | | |  | |

**GROUP PREFERRED**

|  |  |
| --- | --- |
| Part I : Tamil / Sanskrit / French  Part II : English | Part I : …………………………………………………..  Part II : English  Group : ……………………………………………….. |

**PART III** : ( Choose any one )

Group I : Physics , Chemistry, Mathematics, Computer Science

Group II : : Physics , Chemistry, Mathematics, Biology

Group III : Economics, Commerce, Accountancy , Computer Science

Group IV : Economics, Commerce, Accountancy, Business Maths

**PARENT’S DECLARATION**

I hereby declare that the above entries are correct to the best of my knowledge and I undertake to abide by the rules of the school.

I declare that I will not ask for a change in the date of birth in future.

Place: **SIGNATURE OF THE APPLICANT: ……………………**

Date:

**SIGNATURE OF FATHER / MOTHER / GUARDIAN**

**Enclosures :**

1. Community Certificate (if applicable)
2. Original Transfer certificate.
3. X Std Original Mark sheet.
4. Copy of Birth certificate

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FOR OFFICE USE ONLY

GROUP ALLOTTED: Principal