

**(Recognised by Govt. of Tamilnadu)**

**Ranganathan Street, Chrompet**

Photo

**Chennai-600 044**

Ph: 044- 2223 1611, E-Mail : scsmatric.hr.sec@gmail.com @gmail.com

|  |  |
| --- | --- |
| **LKG** | **UKG** |

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| --- |
| **Date of Admission** |
|   |   |   |
| Adm # : |

|  |  |  |  |
| --- | --- | --- | --- |
| Date of Regn. |   |   |   |
| Standard |   |

**FORM OF APPLICATION FOR ADMISSION**

|  |  |
| --- | --- |
| 1. Name of the Student (in Block Letters) |   |
| 2. Date of Birth & Age |   |
| 3. Mother Tongue & Nativity |   |
| 4. Does the pupil belong to SC/SC/BC/OC ? |   |
| 5. Particulars of Parent /Guardian |   |
| 5.1 Name |   |
| 5.2 Educational Qualification |   |
| 5.3 Designation |   |
| 5.4 Annual Income |   |
| 5.5 Residential Address |   |
|   |   |
|   |   |
| Phone Number |   |
| Email |   |
| 6. Do you need transport facility? |   |
| 7. Does the pupil have any family members/relative studying in SCS? |   |

**Note:**

1.Enclose Birth certificate.

2. Pupil joining/leaving school in the middle of the year will have to pay the fees for that whole ter.

**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 given in the prospectus.

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

Place:

Date:

**SIGNATURE OF FATHER / MOTHER / GUARDIAN**

**CORRESPONDENT PRINCIPAL**

Pupil is admitted on the understanding that they will remain in the school for the entire course.