



CONFIDENCE SCHOOL OF EXCELLENCE

A CO-EDUCATION ENGLISH MEDIUM DAY BOARDING CUM RESIDENTIAL SCHOOL.
RUN AND MANAGED BY: SOHRAB ALI FOUNDATION.

WAKILPARA (N.H.31), POST+DIST-KISHANGANJ, BIHAR, PIN-855107
Helpline: 7362966926 / 8987214185 | Email: csekneinfo@gmail.com

ADMISSION FORM

Admission Form for Session ----- Admission No. -----
Date: ----- Admission sought for Class -----

(USE CAPITAL LETTERS ONLY)

1. Name (Master/Miss) -----
2. Father's Name -----
3. Mother's Name -----
4. Date of Birth -----
5. Aadhar Card No.-----
6. Category SC/OBC/ ST -----
7. Caste-----
8. Religion----- Sex(Male/Female) -----
9. Permanent Address -----

10. Correspondence Address: -----

**Fix
Photograph
of
Student**

11. Phone/Mobile No. Office-----Res. -----

12. Mother Tongue -----Nationality-----

13. Bus facilities required (Yes/ No) If Yes, from -----
to -----

14. Class in he /she has been studying in the last school:

Name of School -----

Class -----

Medium -----

15. Transfer Certificate / School Leaving Certificate -----

16. Single Child (Only boy/ Only Girl)-----

17. Particulars of all Brothers/ Sisters study in same school: -----

S.No.	Name of the Child	Age	Class & Section
1.			
2.			
3.			

18. Any physical ailment -----

19. Any two hobbies of your child: (a) -----(b) -----

20. Special Interest : -----

21. Family Information (WRITE IN CAPITAL LETTERS)

Mother's Name -----

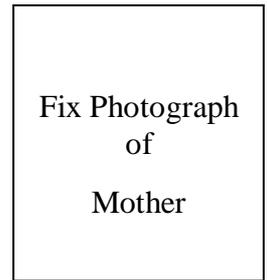
Academic Qualification -----

Occupation & Designation -----

Address of the Organization where employed -----

Office Tel. No. -----Mobile No. -----

E-mail - - - - -



Father's Name -----

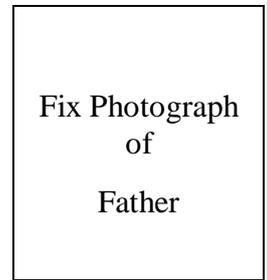
Academic Qualification -----

Occupation & Designation -----

Address of the Origination where employed-----

Office Tel. No. -----Mobile No.-----

E-mail- - - - -



I certify that I am the parent / bonafide guardian of the child and information given in this form is true to the best of my knowledge. I have carefully read the prospectus and agree to abide by the rules, regulations and procedures laid down there in and accept that they may change from time to time at the directions of the school management and extend my full co-operation to keep things moving in a healthy manner.

Signature of Parent / Guardian

Date:

FOR OFFICE USE ONLY

ATTACH FOLLOWING DOCUMENTS:

1	Attested Xerox copy of DOB certificate		5	School leaving Cert. /Transfer Cert.	
2	Photographs of Student		6	Passing Certificate/ Mark Sheet	
3	Parent's Photographs		7	Character Certificate	
4	Attested Xerox copy of Aadhar Card		8	Attested Xerox copy of SC/OBC/ ST	

Admission No. -----Reg.No. ----- Admitted to Class -----

Section ----- Date----- Office Supdtt.-----

Checked and Recommended

Principal