



**SIVAKASI NAICKER MAHAMAI FUND MATRICULATION HR. SEC. SCHOOL**  
SIVAKASI - 626 189.

**Application Form 20 - 20**

Application No. \_\_\_\_\_

Date of Issue \_\_\_\_\_

Admission No. \_\_\_\_\_

Admission to Class : (Please Tick ✓)

☐ LKG

☐ UKG

☐ I

☐ II

☐ III

☐ IV

☐ V

☐ VI

☐ VII

☐ VIII

☐ IX

☐ X

☐ XI

Affix a recent  
Passport Size  
Photo

H.Sc : Group I : Maths, Physics, Chemistry and Biology  
Group II : Maths, Physics, Chemistry and Computer Science.  
Group III : Commerce, Economics, Accountancy and Computer Science  
Group III(a) : Commerce, Economics, Accountancy and Business Maths

Previous School Studied  
(Name & Place) \_\_\_\_\_

Board of Study :

☐ Matric

☐ State

☐ CBSE

☐ Anglo-Indian

☐ ICSE

☐ Others Please write the Board

**A. APPLICANT'S INFORMATION**

Name (in BLOCK LETTERS)

\_\_\_\_\_

☐ M

☐ F

Date of Birth

Date

Month

Year

Age

Nationality

Mother Tongue

State

Religion

☐ SC

Scheduled Caste

☐ SCA

Scheduled Caste

☐ ST

Scheduled Tribe

☐ SS

Scheduled Tribe

Specify the Community  
(For Statistical purpose only)

☐ MBC

Most Backward Class

☐ BC

Backward Class

☐ BCM

Backward Class - Minorities

☐ OC

Residential Address

Phone.

Mobile

The student will be residing with

☐ Parent

☐ Legal Guardian Name

Ph. \_\_\_\_\_

Specify any two identification marks of the student

1.

2.

General informations about the applicant's brother(s) / sister (s) ?

Name

Class

School

Language(s) used at home :

A

B

C

### Co-curricular / Extra Curricular Activities :

1. Please list all representations in National / State / Divisional / District / Zonal / School level in sports, Literary, Cultural and other activities (Attach a separate sheet if space is insufficient)

Activity	Level	Position held / Type of Participation / Awards	Tenure
Eg : Volleyball	Zonal	Winner	20 -20
1.			
2.			
3.			

II. If any special talents possessed, specify

## B. PARENT'S INFORMATION

Particulars	Father	Mother
Name		
Educational Qualification		
Mobile Number		
E-mail ID		
Designation		
Office Phone Number		
Annual Income (Statistical Purpose)		

Does your child have any special health concern, infirmity, allergy, etc.,? If so please specify  
(Enclose a copy of the related document to the H.M. concerned)


Whether transport facility is required?

(Confirm the availability of route before paying the fee) (LKG to Std. XII)

☐ Yes

☐ No

If yes, specify place and boarding point

Distance from school to residence

Kms

#### NOTE TO PARENTS

1. Please fill in all relevant columns provided. Incomplete form will not be considered
2. Fee once paid will not be refunded.
3. TC request will be considered only after ascertaining the previous TC on record.

#### Declaration

1. I hereby declare that the above statements are correct and true to the best of my knowledge and belief.
2. I declare that I will not approach for any alteration (in the date of birth and community in future)
3. I declare that my child is physically and mentally fit to cope with the rules and regulations, systems and the curriculum of the school.
4. I agree that the school is not responsible if my child leaves the campus intentionally without anybody's notice or permission or personal guidance and for any kind of mishappenings in and off the campus.
5. All legal procedures restricted only to jurisdiction of Sivakasi.
6. I hereby also agree to abide by the existing rules and regulations in force and those that may be framed from time to time.

.....  
Signature of Father

.....  
Signature of Mother

.....  
Signature of Guardian

.....  
Date



For Office use only

Provisionally selected for admission in Standard

HSc

Bio Maths

C.S Maths

Commerce

Signature of the Principal

Date

To be filled by Accounts Department

Admitted in Class

Bill Number

Date of Admission

Submission of Certificates / Statements / Report

1. Transfer Certificate

(Counter Signed by IMS/CBSE office for Matric/CBSE Students from other State)

☐

Yes

☐

No

☐

Xerox

☐

Original

2. Birth Certificate

(Compulsory)

☐

Yes

☐

No

☐

Xerox

☐

Original

3. Mark Statement / + 3 Xerox copies

(Compulsory Xerox copy - Attach)

☐

Yes

☐

No

☐

Xerox

☐

Original

4. Community Certificate - a community certificate

(Compulsory Xerox copy - Attach)

☐

Yes

☐

No

☐

Xerox

☐

Original

5. Migration Certificate

(If the student is from another country)

☐

Yes

☐

No

☐

Xerox

☐

Original

6. Specify if any other

7. Signature of the Administrative Officer