



ATHENA WORLD SCHOOL

Raising Talent, Designing Future

ADMISSION FORM
20__ to 20__
Grade I to IX
Date: _____

Admission Number: _____

Children

Father

Mother

Name of the student (In block letters) _____

Admission to class _____

last school attended name _____

City: _____ State _____

Reason for leaving school _____

Gender (Put a tick mark) M F

Date of birth (in figures) _____

(in Words) _____

Nationality _____ Place of birth: _____

Mother tongue _____

Religion _____ Caste _____ Sub caste _____

GENERAL/OBC/SC/ST _____

(Attach certificate)

Single child Y N

Residential address _____

Telephone no. _____

Permanent address _____

Telephone no. _____

Father's Name: _____ Age: _____

Qualification _____ Occupation _____

Designation _____ Annual income: _____

Work Address _____

Telephone no. (M) _____ (O) _____

Email: _____

Mother's Name: _____ Age: _____

Qualification _____ Occupation _____

Designation _____ Annual income: _____

Work Address _____

Telephone no. (M) _____ (O) _____

Email: _____

Guardian's name: _____

Telephone no. _____

Sibling in school

Name of student _____ Class _____ Div. _____

Name of student _____ Class _____ Div. _____

Transfer Certificate, Birth Certificate should be submitted to school.

Please attach a visiting card here.