KRISTUJYOTI KRISTUJYOTI KRISTUJYOTI KINDERGARDEN & DLAY SCHOOL ANISO 9001:2015 CERTIFIED INSTITUTION I Chethipuzha, Kurisummoodu P.O., Changanassery, Kottayam, Kerala - 686 104 Tel: 0481-2722037, 2721980, 2721937 Email: kristujyotikindergarten@gmail.com, URL: www.kristujyotikg.com APPLICATION NO:									
KGP/ADM/02 [PLAYSCHOOL]									
 Name of the Calculation 2. Class Applied: 	PLAY SCHOOL						Photo		
3. Date of Birth: (Should Complete 3 yrs on June 2023)									
4. Sex: Male Female 5. Place of Birth: 6. Nationality: 7. Mother Tongue:									
8. Religion:	9.Caste:				овс	OEC	GEN	EWS	
11. If Christian, Parish:				12. Annual Income:					
13. Blood Group: 14. Aadhar Number:									
15. Address with P	15. Address with Pin code:								
	Permanent				Preser)t			
16. Communication Land Phone With STD Code	n Details: Mobile No.	SMS	No	Whats	app No		l ID (Capit ters only)	tal	
17. Parent's Details	s:								

	Father	Mother
Name		
Educational Qualifications		
Occupation		
Mobile Number		
Office Address		

18. Name of Local Guardian:						
19. Occupation: 20. Relation	19. Occupation: 20. Relationship with Local Guardian:					
21. Address of Local Guardian with Pin Code.						
Residential	Office					
Tel (with STD Code) : Mobile No:	Tel (with STD Code) : Mobile No:					
22. Whether the student needs school bus facility	: Yes / No					
If yes, write the preferred boarding point:						
Nearest KSRTC / private bus stop:						
23. Whether any of your relatives are working/studying in this school: Staff / Student						
Particulars:						
DE	CLARATION					
<i>I hereby declare that the above information including Name of the Candidate, Father's / Guardian's Name,</i>						
Mother's name and Date of Birth furnished by me is correct to the best of my knowledge and belief. I shall						
abide by the rules of the School.						
Date : Place :	Signature of the Parent / Guardian					
Documents to be Submitted.						
1). Copy of the Birth Certificate.						
2). Copy of the Aadhaar Card.						
Incorrect and incomplete applications will be rejected.						
FOR OFFICE USE ONLY						
Date of admission:	Adm. No :					
Class: PLAYSCHOOL						
The child was accompanied by: Father Mo	ther Guardian					
Remarks :						
Signature of the Headmistress	Signature of the Principal					
	REV:06					