



St. Mary's Residential Public School

"49th Year of Excellence"

Paliakara, Thiruvalla – 689 101

Ph : 0469 – 2600710, 2605739, +91 9249455768

REGISTRATION FORM 2023-'24

Serial No.:

(to be assigned by the School)

Affix OR
attach
Passport Size Photo
of the student

Name of Pupil (in capital letters)*:

First Name

Middle Name

Last Name

Date of Birth*:

DD

MM

YYYY

Gender*:

☐

Male

☐

Female

Aadhar No. *:

Blood Group*:

Religion*:

Community*:

Class to which admission is sought*:

Second Language (if applicable) :

Third Language (if applicable) :

Stream Opted (**Only for admission to Class 11**) Please mention in the check box

according to the **order of preference** of group. Eg: 1,2,3

Group A – Physics, Chemistry, Biology, Informatics Practices, English

Choose an item.

Group B - Physics, Chemistry, Biology, Mathematics, English

Choose an item.

Group C – Mathematics, Physics, Chemistry, Informatics Practices, English

Choose an item.

Group D - Accountancy, Economics, Business Studies, Informatics Practices, English

Choose an item.

Group E – Accountancy, Economics, Business Studies, Mathematics, English

Choose an item.

Group F – Psychology, Political Science, History, Economics, English

Choose an item.

Parent's Information:Father's Name (in Full) *: Father's Qualification*: Father's Mobile No. *:

(Area/Country Code)

Father's Email ID*: Father's Occupation*: Father's Organization*: Father's Official Address*: Mother's Name (in Full) *: Mother's Qualification*: Mother's Mobile No. *:

(Area/Country Code)

Mother's Email ID. *: Mother's Occupation*: Mother's Organization*: Mother's Official Address*: Annual Income of the Family (INR) *: ₹ Last School attended by the Pupil *:

Name of own brother(s)/sister(s) studied or studying in this Institution and Class

School Hostel facility required? *

☐ Yes☐ No

Whether School bus required, if yes, mention exact boarding point*

☐ Yes☐ NoBoarding Point (if yes)

Permanent Address * :

Alternate Guardian Details

Guardian's Name :

Guardian's Phone No.:

Guardian's Email ID :

Instructions, please read carefully:

1. I/we certify that the above information provided by me/us is correct.
2. You are requested to fill all the relevant information in the registration form using latest version of Adobe Acrobat. All (*) marked fields are mandatory. You may also Print and Fill, Scan and send it along with the screenshot of registration fee payment details and passport size photograph to adm.smrps@gmail.com

3. Registration fee of ₹ 350/- (non-refundable) may be sent to the following account.

Bank : Canara Bank

Branch : Market Road Branch, Thiruvalla

A/c Name : St. Mary's Residential Public School

A/c No.: 41063070000428

IFS Code : **CNRB0014106**

ST MARYS RESIDENTIAL PUBLIC SCHOOL



233716777000428@cnrb

4. Incomplete or partially filled forms will not be accepted.
5. Registration is no guarantee for admission and admission is granted purely on merit basis and availability of seats.

I the Parent/Guardian acknowledge that I have read all the terms and conditions

☐ Yes

Name of Parent/Guardian:

Place:

Date:

Signature

-----FOR OFFICE USE ONLY-----

Serial No.:

Admission status :

Class and Division :

Signature of Principal