

Form No. 

## ADMISSION FORM

Date 

# Ananda Purna School Of Sciences

A Co-educational Hr. Sec. Section of Ananda Purna School

Near Tomjing Makhong , Thoubal, Manipur - 795138

[anandapurnaschool.com](http://anandapurnaschool.com)

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Please complete each section in **BLOCK LETTERS** \*To be filled by office only. Tick(✓) whenever necessary.

Academic Session:	<input type="text" value="2016-17"/>	Class:	<input type="text" value="XI"/>	* Section:	<input type="text"/>	Stream:	<input type="text" value="Science"/>
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Surname	Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Gender(✓)	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Date of Birth	<input type="text"/>	Blood Group	<input type="text"/>	Additional Subjects (✓)
* Enrollment No.	<input type="text"/>	* Enrollment Date	<input type="text"/>	* House	<input type="text"/>	<input type="checkbox"/> Home Science	<input type="checkbox"/> Mathematics
* Fee Category	<input type="text"/>	* Extra School Facility(✓)	Hostel <input type="checkbox"/>	Transport <input type="checkbox"/>	Religion	<input type="text"/>	Clan
Identification Mark	<input type="text"/>	Contact No.	<input type="text"/>	Emergency Contact No.	<input type="text"/>		
Caste	<input type="text"/>						
Email Address	<input type="text"/>						

### Health Info

Height ( cm )	<input type="text"/>	Allergic Substances	<input type="text"/>
Weight ( kg )	<input type="text"/>	Medical History	<input type="text"/>

### Permanent Address

Address	District
<input type="text"/>	<input type="text"/>
Landmark	State
<input type="text"/>	<input type="text"/>
	Pin
	<input type="text"/>

### Communication Address Same as Permanent Address

Address	District
<input type="text"/>	<input type="text"/>
Landmark	State
<input type="text"/>	<input type="text"/>
	Pin
	<input type="text"/>

### Father's Details

Surname	Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone Number	Email Address	Occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>

### Mother's Details

Surname	Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone Number	Email Address	Occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>

### Guardian's/ Local Guardian's Details

Surname	Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone Number	Email Address	Occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>

### Additional Info

Name of the Institute/School last attended	Address of the Institute/School last attended
<input type="text"/>	<input type="text"/>

### Details of Examination Passed

Exam Passed	Board	Year	Roll No.	Division	PC/Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### Subjects Selected (✓)

<input checked="" type="checkbox"/> English	<input checked="" type="checkbox"/> Physics
<input type="checkbox"/> Manipuri	<input checked="" type="checkbox"/> Chemistry
<input type="checkbox"/> Alternative English	<input checked="" type="checkbox"/> Biology

### Attachments [ N.B. Zerox copy should be attested from School Counter ]

<input type="checkbox"/> Mark sheet of HSLCE (3 copies)
<input type="checkbox"/> Provisional Certificate of HSLCE (3 copies)
<input type="checkbox"/> Admit card of HSLCE (3 copies)
<input type="checkbox"/> Migration Certificate [ For student passed from Board other than BSEM ]

**Declaration of the Candidate**

I, Shri/Miss.....  
son/daughter of Shri/ Smt. ....  
hereby declare that I shall abide by the rules and regulations of the school. Further, I declare that the information and documents furnished with the form are true to the best of my knowledge. In case of any eventuality of false information / documents I shall be responsible for it and I also understand that, my admission shall be cancelled and admission fee shall be forfeited.

Date :  
Place :

Signature of the candidate

**Declaration of the Parents/Guardians**

I, father/mother/guardian of Shri/Miss. ....  
hereby declare that I shall be responsible for the conduct and behaviour of my son/daughter during his/her study at school and shall co-operate with the school authority towards creating harmony at school.

Date :  
Place :

Signature of the parents/guardian

**For Official Use Only**

- 1. Documents are checked and verified by.....
- 2. Receipt No(if admitted)..... Date.....

Signature

Admitted

Not Admitted

Principal  
Ananda Purna School of Sciences  
Thoubal



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