

SNEHA SADAN SPECIAL SCHOOL POTHYAKKARA

ADMISSION FORM

Name of the child :

Address :

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Post Office :

Pin Code :

Local Body :

Taluk :

State :

Phone No. :

Gender :

Aadhaar :

Religion , Caste & Category :

Date of birth :

Type of Disability :

Physical handicap if any :

When was it discovered :

Father's Name & Profession :

Office Address :

Mother's Name & Profession :

Office Address :

Income(Rs) , (APL/BPL) :

Name & Age of Siblings (if any):

Date of Admission :

Date of Dismissal :

Remarks: The application should be accompanied by:

- a) Medical Board Certificate with the case record (brief history) of the child
- b) Psychological Test
- c) Photograph
- d) Birth Certificate, Aadhaar Card, Unique Disability I D(ID-Card), Bank Pass Book, Ration Card

Iparent/guardian of

hereby declare that all the information, provided above are true to the best of my interest. I agree to abide by the Rules and Regulations of the institution.

Signature of the Parent

Place & Date :

Signature of the Head of the institution