



Tilak Education Society's

TILAK PUBLIC SCHOOL

(Affiliated to C.B.S.E. Board, Delhi. Aff.No. 1130159)

PLOT NO. 31, SECTOR-25, SEAWOODS, NERUL (E), NAVI MUMBAI - 400 706.

E-mail: tps.nerul@gmail.com Website: www.tilakedu.com PH.: 27711481/27710033

No: _____

Date: _____

APPLICATION FOR ADMISSION

- Name in Full _____
(Surname) (Pupil's Name) (Father Name)
- Name of Mother _____
- Religion _____ Caste _____ I belong to SC/ST/D.T./NT/OBC/Others
- Date of Birth (in figures) _____
(in words) _____
- Students Aadhar no. _____ Nationality _____
- Place of Birth, District and State _____
- Language spoken at home _____
- Last School attended and the examination passed _____
- Class to which admission is sought _____
- Residential address in full _____
- Permanent address (Native Place) _____
- Parents / Guardian's Income _____
- Parents / Guardian's Name and office address _____
_____ Fathers Mobile No. _____
Email id _____ Mothers Mobile No. _____

DECLARATION

The information furnished above on behalf of _____
is true and correct to the best of my knowledge. I have read the Rules and Regulations of the School and undertake to submit to the normal enforcement of the same, to the satisfaction of the Principal/Headmistress whose decision shall be final.

Date: _____

Signature of Parent / Guardian

INSTRUCTION TO APPLICANT

- Birth Certificate / School Leaving Certificate in original should accompany this application.
- The School authorities reserve to themselves the right of asking the applicant to leave the School at any time for persistent breach of School rules or for rude or insolent behaviour or of any other reason which in their opinion spoils the general discipline of the school.
- The School Leaving Certificate from school outside Maharashtra State should be counter signed by the inspector of school of the area.
- Fees once paid will on no account be refunded.
- Fees should be paid before the 10th of every month.

FOR OFFICE USE ONLY

Name of Pupil: _____

Class to which admitted _____ Division _____ G.R. No. _____

Date: _____

PRINCIPAL