

**APPLICATION FORM FOR ADMISSION**

**ST. JOSEPH'S RESIDENTIAL SCHOOL**



Affiliation No: CBSE/Aff/19476  
Chennai – Bangalore National Highway  
Sriperumbudur – 602105 India  
Website [www.sjrs.ac.in](http://www.sjrs.ac.in)  
Tel: 044-27107008, 27167362, 3, 4  
Fax: 044 – 27167365 Email: [sjrs@dataone.in](mailto:sjrs@dataone.in)

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Admn. No. & Dt. :

**Class – XI - XII**

1. Name of the student (in block Letters)	
2. Class to which admission is sought	
3. Date of Birth	
4. Sex	
5. Nationality & Religion	
6. Community S.C / S.T / M.B.C / B.C. / O.C	
7. Mother Tongue	
8. Name of the school and class studying	
9. Marks scored in the class studying / Board Exam	Enclose the Xerox copy of the Progress Report / X Mark Sheet

**10. Subject Selected:**

<b>SCIENCE STREAM</b>	<b>COMMERCE STREAM</b>
English	English
Physics	Business Studies
Chemistry	Accountancy
Mathematics	Mathematics / Sociology
Biology / Computer Science	Economics / Computer Science
Physical Education / Multimedia & Web Tech	Physical Education / Multimedia & Web Tech
11. Proficiency in Games & Sports Specify the events	
12. Proficiency in extra curricular activities (Attach Certificates)	

**13. Details of Parents:**

<b>PARTICULARS</b>	<b>FATHER</b>	<b>MOTHER</b>
Name		
Education Qualification		
Language Known		
Occupation		

Residential Address		
Phone / Fax /Mobile /E-Mail		

**14. Details of Local Guardians:**

Name	1)	2)
Sex /Relationship		
Occupation		
Address		
Phone / Fax /Mobile /E-Mail		

**15. Specific Medical Treatment if any (Specify):-**

This Application Form must be signed by father if alive otherwise y Mother or Legal Guardian

**PARENT'S DECLARATION**

I hereby declare that the above entries are correct to the best of my knowledge and I undertake to abide by all the rules and regulations of the school stipulated in the prospectus.

**Place:**

**Date:**                      **Signature of the Mother**

**Signature of the Father**

**PRINCIPAL**