

UNIQUE PUBLIC SCHOOL

FERNHILL, OOTY -643004, THE NILGIRIS TAMILNADU

PH: 0423-2445060, E-Mail- uniquepublicschool.ooty@gmail.com, website:www.upsooty.com

REGISTRATION FORM

NO: -----

ADMISSION FOR CLASS _____, YEAR _____

1. Name of the pupil in BLOCK letters

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2. Date of Birth

D	D	M	M	Y	Y	Y	Y

3. Gender

MALE		FEMALE	
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4. Religion _____

5. Mother Tongue _____

6. Parent's Details

	FATHER	MOTHER
Name		
Qualification		
Occupation		
Address		
Phone No		
E-Mail Id		

7. Address for Communication

I hereby request you to register my son/ daughter for admission to Class _____ for the academic session beginning April 20_____. Herewith I have paid an amount of Rs. _____ towards Registration, which is not refundable under any circumstances.

Parent Signature