



Ph. No. : 06243 - 242435, Mobile No. : 9431499147

SUN FLOWER SCHOOL

KAPASIYA TOWNSHIP, BEGUSARAI - 851117

Affiliated to CBSE upto (10+2)

REGISTRATION FORM S/Code : 50141

Passport Size Photo

Aff. No. : 330226

Sl. No.

To be filled in by the PARENT/GUARDIAN in BLOCK letters only

Candidate's Name

[Grid for Candidate's Name]

Mother's Name

[Grid for Mother's Name]

Father's Name

[Grid for Father's Name]

Date of Birth

[Date of Birth grid]

(In Words)

Sex

- 1= Male
- 2= Femal

Category

- 1= SC
- 2= ST
- 3= OBC

HANDICAPPED

- 1= BLIND
- 2= DEAF
- 3= HANDICAPPED
- 4= DYSLEXIC
- 5= SPASTIC

[Grid for Address]

[Grid for Address]

Present Address

[Dotted lines for Present Address]

Permanent Address

[Dotted lines for Permanent Address]

Phone No.

STD Code.....

Res.....

Off.....

Std. X Examination Details (To be Filled in by Candidates applying for XI / XII)

Name of Examination Passed	Name of Board	Roll / Reg. No.	Year of Passing	Aggregate %

Course fo Studies to be taken

Combination of Subject (refer to the Prospectus): Science/Commerce/Arts (Strike off whichever is not applicable)

Lang. 1 : Paper 2 : Paper 3 :

Paper 4 : Paper 5 :

Additional Paper :

Attach Original Std. X Mark-Sheet / School Leaving Certificate / Character Certificate / Migration / Passing Certificate and Admit-Card.

The above information furnished by me herein is correct. If any information is found to be incorrect at any stage it will disqualify my ward's selection for admission.

N.B. : The School management reserves the right to admit any candidate without assigning any reason and no claim will be entertained in this regard.

Date :

Signature of Parent

Seal

Principal/Vice-Principal