



ALPHA INTERNATIONAL SCHOOL

Velacherry Main Road, Sembakkam, Chennai – 600 073 Ph: 044 – 22270632

APPLICATION FORM

I	Name of the pupil (Bold Letters)	:
	Gender: (Male/Female)	:
	Age & Date of Birth (DD/MM/YYYY)	:
	Community	: OC/BC/MBC/ SC/ ST
	Mother Tongue	:
П	Name of Father / Guardian	:
	Qualification	:
	Occupation	:
	Annual Income	:
	Mobile No	:
	Name of the Mother	:
	Qualification	:
	Occupation	:
	Annual Income	:
	Mobile No	:
Ш	Residential Address	:
	Telephone	:
	E-mail	:
IV	Second Language Preferred	: Tamil/ Hindi/ French
٧	Class to which admission is sought	:
VI	Any sister/ brother studying in Alpha School? If so, mention his/her name, class, section & branch (If not applicable write NA)	:

VII Name of the school last attended		
and reason for change of school	:	
VIII How did you come to know about our school? (Advertisment in newspapers, online ads, signboards, references, etc) Please specify		
Note:		
Please ensure that application is submitted of done.	on or before	or else fresh registration has to be
A self-addressed envelope (16cm X 10cm) a	affixed with a five rupee postal stam	p to be enclosed with the application
Date :		Cignotius of the Desert
		Signature of the Parent
Enclosure: Photocopies attested by a Gazet	ted Officer	
1. Birth Certificate of the Studen	nt	
2. Community Certificate		

3. Proof of the address