

MOUNT CARMEL SR. SEC. SCHOOL, KAKKON, HOSHIARPUR

E-mail: principalmcshsp@gmail.com

Registration Form For XI

1. Name of the child (in block Letters)
2. Date of Birth (in Figures)
(in words)
3. Father's name Mob. No
Qualification Occupation
4. HOME ADDRESS
5. Business Address
6. Mother's Name Mob. No
Qualification Occupation
7. Class to which admission is sought
Please Select Stream :-
Medical Non-Medical Commerce
English and computer Science compulsory for all
8. Institution last attended with address
9. Total Percentage of pre-Board exams
(Please attach Pre. Board Report Card also)
10. Unique ID Number of ICSE Board

NB : Eligibility criteria for Registration Application

- # Candidate must have scored not less than 65% in pre- board examination.
- # Please fill this form and send it to the above mentioned Email address.
- # Last date for application – 30th April, 2020

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately.

FORM SUBMITTED BY