



LITTLE QUEEN PUBLIC SCHOOL

Olarikkara, P.O. Pullazhi, Banglavu road ,Thrissur- 680 012

Ph:9207516490, E-mail:littlequeen2012hfco@gmail.com

Affiliated to Central Board of Secondary Education, New Delhi

Affiliation No : 931318

ADMISSION FORM

Application No :

Personal Details

Name of Pupil :

Gender : /

(As in Birth Certificate, To be filled in Block letters)

Class : Blood Group

Date of birth :

Place of Birth :

Nationality :

Religion :

Caste :

Identification Marks :

Please attach
recent
photograph

Parent Details

Name of Father :

Name of Mother :

Education Qualification &
Occupation of Father :

Education Qualification &
Occupation of Mother :

Office Address of Father
with phone Number :

Office Address of Mother
with phone Number :

Email :

Details of siblings studying in Little Queen Public School (if any)

1. Name

2. Name

3. Name

4. Name

5. Name

6. Name

Contact Details

Current address :

Permanent Address :

Current Tel No :

Permanent Tel no:

Mobile No :

Declaration of Parent/ Guardian

I hereby declare that all information given by me in support of my ward's application is true. I promise to abide by the rules and regulations of the school and any modifications from time to time.

Date :

Place :

Signature of Parent/ Guardian

For office use only

Admission No :

Date :

Place :

Signature of Principal