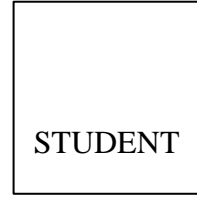


LITTLE STAR NURSERY



PHOTO

[DETAILS AS PER PASSPORT]

NAME OF STUDENT.....

DATE OF BIRTH.....**PLACE OF BIRTH[COUNTRY]**.....

NATIONALITY.....**RELIGION**.....

ADMITTED TO**ADMISSION NO.**

FATHER'S/GUARDIAN'S NAME.....

ADDRESS.....

TEL. NO. OFFICE **RES.**

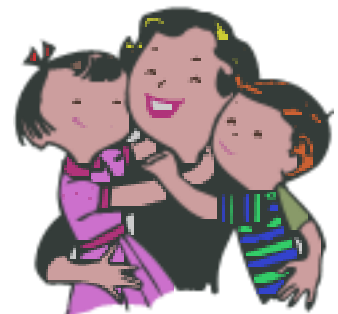
OWN TRANSPORT PICK UP TIME.....

SCHOOL TRANSPORT /BUS NO.**DROP-OFF-TIME**.....

REMARKS.....

.....

.....
HEADMISTRESS



AGE AT ADMISSION

LANGUAGE SPOKEN AT HOME

SPECIAL LIKING

HEALTH.....

DOES YOUR CHILD HAVE ANY RECURRING HEALTH PROBLEM ?.....

GIVE PARTICULARS IF ANY

NAME, ADDRESS & TEL. NO. OF THE PERSON TO CONTACT IN CASE OF ANY EMERGENCY DURING SCHOOL HOURS.

NAME

CONTACT NOS. [OFF.] [RES.].....

NOTE TO CLASS TEACHER : You may put down any personal details about the child that would help us understand him/her better. (Is on pampers , Eating / sleeping habits , Vocabulary etc.)

.....

.....

)

Kindly make a note of your weekly off

Father : Thursday / Friday / Saturday **Mother** : Thursday / Friday / Saturday

.....
SIGNATURE OF PARENT/GUARDIAN