



CHRIST THE KING PUBLIC SCHOOL

(A Unit of Archdiocesan Board of Education)

Malleswaram West, Bengaluru-560055

Ph: 080-23467660 Email: office@christthekingpublicschool.com

Affiliated to the CISCE, New Delhi. School Code: KA390

Application Form

Affix a Passport
size photograph

Application No.:

Academic Year: 20 - 20

Class Applied For: _____

Student's Name (in Block letters): _____

Gender: Male Female (Tick as applicable).

Date of Birth: DD MM Y

Age: _____ Year: _____ Months: _____ Days: _____
(As on 1st June)

Nationality: _____ Religion: _____

Mother Tongue: _____

Caste: _____ SC ST OBC General

(Please attach documents of proof)

PARENTS DETAILS

Father's Name: _____

Academic Qualification: _____

Profession / Designation: _____

Office / Company: _____

Office Address: _____

Annual Income: _____

Mother's Name: _____

Academic Qualification: _____

Profession / Designation: _____

Office / Company: _____

Office Address: _____

Annual Income: _____

Details of Siblings if any Studying at Christ The King Public School , Malleshwaram

Name: _____ Name: _____

Class: _____ Class: _____

Admission No.: _____ Admission No.: _____

MEDICAL INFORMATION

Student's Blood Group: _____

History of illness: _____

(Specify) _____

(The school will not be responsible if serious medical history is withheld)

CONTACT DETAILS.

Residential Address: _____

Address for Communication: _____

Residential Telephone No.: _____

Father's Mobile No.: _____ Office No.: _____

Mother's Mobile No.: _____ Office No.: _____

Parents E-mail ID: _____

[Previous School Details (not applicable for Nursery admission) BLOCK LETTERS]

Name and Place of the previous school: _____

Class last Studied: _____

Pattern of Education (Tick applicable)

CBSE ICSE State Board Others

Please Select the Language options.

2nd Language: (Class I Std to VIII Std) Hindi Kannada

3rd Language: (Class I Std to VIII Std) Hindi Kannada

I declare that the details mentioned above are true and I shall abide by the rules and regulations of the school.

Place: _____

Date: _____

Signature of the Parents / Guardian

Document to be submitted along with the Application Form.

1. Copy of the Birth Certificate / Catholic students to submit baptism certificate also.
2. Transfer certificate (For class 2-8 Original to be submitted by 15th June of the new academic year)
3. Report card of last class.
4. Caste certificate (if applicable)
5. 3 Passport size photographs.
6. Aadhaar card copies of student / parent
7. Photo copies of parents highest Educational Qualification
8. DISE code:_____
9. STS No.:_____
10. Any other Documents:_____

(Birth certificate in the name of the applicant from Govt. / Municipality only are valid. Incomplete forms will be rejected)

FOR OFFICE USE ONLY

Name of the Student: _____

Admit to class:_____ Section:_____

2nd Language: Hindi / Kannada.

3rd Language: Hindi / Kannada.

Date of Admission:_____

Receipt Number:_____

Principal's Signature