

SMART START PLAYSCHOOL & DAYCARE CENTER

Alagappapuram, Karaikudi.
Ph- 04565- 229397

ADMISSION FORM

Admission No. : _____

Date of Admission : _____

Admission Form for Class : _____

1. Students Name : _____

2. Father's Name : _____ Qualification : _____

3. Mother's Name : _____ Qualification : _____

4. Date of birth : _____ Age : _____

(Birth Certificate to be attached)

5. Gender : Male / Female

6. Timings : Playschool
9:00 AM – 2:00 PM

Daycare
9:00AM – 5:30PM 2:00PM – 5:30PM

7. Home Address: _____

8. Parents Mobile : _____

9. Parent's Occupation: _____ Annual Income: _____

9. Religion: _____ Community: (MBC / SC / BC / ST) _____ Caste : _____

10. Student Aadhar Card No.: _____

11. Bloog Group : _____

Signature of Father/Mother

FOR OFFICE USE ONLY