



Faculty Higher Secondary School

Service before Self

Application/Admission Form

I. Student Information

Name of the Student : _____
First Name Middle Name Last Name

Date of Birth : ____/____/____ Sex : M F
DD MM YY

Place of Birth : _____

Nationality : _____

Mother Tongue : _____

Mother's Name : _____

Mother's Educational Qualification : _____

Mother's Occupation : _____

Father's Name : _____

Father's Educational Qualification : _____

Fathers Occupation (If Business Please Specify) : _____

Fathers Office/Business Address : _____

Admission Desired in Class : _____ For Session : _____

Name of His/Her Present School – Board : _____

Class in which He/She is Presently Studying : _____

Address for Correspondence : _____

Permanent : _____

Telephone Number : _____

E mail Address : _____

Details of Siblings who are Students of
Faculty Higher Secondary School or is an Alumni of the School : _____

Languages Spoken at Home : _____

II Other Details

How much time do you give to your child's education at Home? : _____

Why have you chosen to apply to Faculty Higher Secondary School? : _____

What are you child's interests and Special aptitudes? : _____

Has your child ever been assessed for or placed in a special educational or gifted programme or has been referred to an external agency fro support services (eg child guidance, speech therapy, psychological Assessment etc) : _____