



FIRST BLOOM SCHOOL

Tuli Yong Ward, Tuli Town – Tuli 798618

Dist : Mokokchung : Nagaland

Ph. No.# 8729995856, # 9402807947, # 9615818575

APPLICATION FORM FOR ADMISSION

PHOTOGRAPH
PASTE ONE COPY &
ATTEST ONE COPY

SL.NO.

Name : _____

Date of Birth : _____ Sex _____

(enclosed a Xerox copy of Birth Certificate, Vaccination Card and Aadhaar Card)

Address : _____

Father's Name : _____

Details of Occupations : _____

Office Address : _____

Tel: Res _____ Off. _____ Mobile _____

Qualification: _____

Mother's Name: _____

Details of Occupation: _____

Office Address: _____

Tel: Res _____ Off. _____ Mobile _____

Qualification: _____

Child's Brothers & Sisters	Age	School
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_____	_____	_____
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_____	_____	_____
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If own brother/sister studied in First Bloom

Name _____ Year _____ To _____

Has the child attended any other School ? _____

Nationality: _____ Community: _____

Language spoken at home: _____

CLASS FOR SEEKING ADMISSION _____

PREVIOUS ACADEMIC RECORD

NAME OF THE PREVIOUS SCHOOL	CLASS	YEAR OF STUDY	PERCENTAGE/RANK

Child's Medical History/Illness/Allergies or Disability. If any: _____

Name, Address and Mobile No. of contact person in case of emergency (apart from parents):

1. _____
2. _____

NOTICES WILL BE SENT TO YOU VIA SMS OR E-MAIL

Preferred E-mail ID of Father/ Mother _____

DECLARATION BY PARENTS/ LEGAL GUARDIAN

We agree to abide by the following rules & regulations:

1. We will inform the First Bloom School whenever our child suffers from any kind of Infectious diseases or illness. We will submit the Doctor's Certificate before he / she resumes classes.
2. We have carefully read the above rules and are signing it willingly.

Mother's Signature

Father's Signature