



# CHINMAYA NURSERY

Form No.:

"School with a Difference"

(A Unit of Chinmaya Mission Educational & Cultural Trust, Thrissur)

Chinmaya Gardens, Kolazhy P.O., Thrissur-680010

Affiliated to Central Board of Secondary Education, New Delhi.

Affiliation No. 930031; Website: [www.chinmayavidyalaya.org](http://www.chinmayavidyalaya.org)

Phone: 0487-2200439

Affix a  
recent  
passport  
size  
photograph

## APPLICATION FOR ADMISSION TO CLASS \_\_\_\_\_

1. Name of the pupil (in CAPITAL LETTERS) as per BIRTH CERTIFICATE : \_\_\_\_\_  
Name of the pupil (if any correction is made after the admission as per \_\_\_\_\_ dated \_\_\_\_\_) : \_\_\_\_\_
2. Sex : Male / Female  
\_\_\_\_\_
3. Blood Group : A / B / O / AB / Rh +/-ve  
\_\_\_\_\_
4. Name of Parent Father : \_\_\_\_\_  
Mother : \_\_\_\_\_
5. Occupation of Parent Father : \_\_\_\_\_  
Mother : \_\_\_\_\_
6. Annual Income of Parent (in Indian Rupees) Father : \_\_\_\_\_ Mother : \_\_\_\_\_
7. Full Postal Address of Parent(s) (in CAPITAL LETTERS) : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Pin Code : \_\_\_\_\_  
Phone No. (with STD Code) : \_\_\_\_\_  
Mobile No. : (F) \_\_\_\_\_ (M) \_\_\_\_\_  
Please specify the Mobile No. for sending SMS : \_\_\_\_\_  
Full Postal Address of Guardian : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Pin Code : \_\_\_\_\_  
Phone No. (with STD Code) : \_\_\_\_\_  
\_\_\_\_\_

8. Date of Birth of pupil (as per English Calendar) – : **Date / Month / Year**  
 in words  
 Age as on 31<sup>st</sup> May 2025 : \_\_\_\_\_ Years \_\_\_\_\_ Months
9. Religion & Caste : Religion \_\_\_\_\_ Caste : \_\_\_\_\_  
 Category (please put ✓ mark) : General / OBC / SC / ST
10. Nationality & State to which the pupil belongs, : \_\_\_\_\_ State : \_\_\_\_\_  
 Nationality
11. Mother tongue of the pupil : \_\_\_\_\_
12. Identification Marks : 1. \_\_\_\_\_  
 2. \_\_\_\_\_
13. Siblings ( if any) : **Yes**  **No**
14. If yes for above please mention details :

Name	Brother / Sister	Age	School Studying in

**DECLARATION**

I, \_\_\_\_\_ father / mother / guardian of \_\_\_\_\_  
 \_\_\_\_\_ solemnly declare that the information / particulars given above are true and correct to the best  
 of my knowledge.

Station: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of the Parent / Guardian

**TO BE FILLED IN BY THE OFFICE**

Date of Admission: \_\_\_\_\_

Admission No.: \_\_\_\_\_

Class to which admitted: \_\_\_\_\_

Signature of the Principal

**Documents to be attached:**

1. Self-attested copy of the BIRTH CERTIFICATE.
2. Self-attested copy of the CASTE CERTIFICATE issued by VILLAGE OFFICER (if the candidate belongs to OBC / SC / ST).
3. Photocopy of the Vaccination Card, If available.
4. Passport size Photograph

