



BLOOMFIELD

#38, 6th Cross, 3rd Block Thyagarajanagar, Bangalore-28

Registration/Application form for Admission -202_ -202_

Serial No:	Receipt No:	Registration No:
	(Office Use)	(Office Use)

A – Issue of Registration from does not ensure Admission.

B – Admission Fee Paid Will be Non – Transferable.

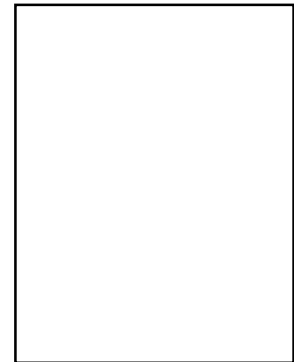
Principal’s Signature:

Date:

1. Name of the Pupil:

(Full Name in CAPITAL Letters only)

*Class to Which Admission in sought:



Pupil

2. Address:

.....

.....Pin-code:

3. Date of Birth:

.....

(in words) Cannot be altered once entered

4. Place of Birth:

5. Address:

.....

.....Pin-code:

6. Mother Tongue:Nationality:

7. Religion:

8. Last School & Class attended (If Applicable) :

9. Father's Name :Nationality:

(In CAPITAL Letters only)

a) Religion:

b) Occupation :

c) Educational Qualification :

d) Phone : OfficeResidence :

Mobile No. :Email Address :

10. Mother's Name :Nationality:

(In CAPITAL Letters only)

a) Religion:

b) Occupation :

c) Educational Qualification :

d) Phone : OfficeResidence :

Mobile No. :Email Address :

Mobile No. for sending SMSEmail ID for communication

11. Monthly income of Father Rs. Mother Rs.

12. Transferable job (Central/State Government employee only):

13. Aadhaar Number of Father : Mother :

 Pupil :

14. Name and Class of any sibling in this School (Not Cousins)/