Date of Admission	<u>:</u>
(For office use only)	

MONGRACE MONTESSORI HOUSE

1, SHORT STREET, KOLKATA – 700 016

APPLICATION / ADMISSION FORM

A recent passport size photograph of the child should be affixed here

Name of the Child:	
Gender:	Male Female
Blood Group:	
Date of Birth:	Date Month Year
Mother Tongue / Language spoken at home :	
Present School: (playhouse / montessori / high school)	

Information about the parents:

	Father	Mother
Name		
School		
School		
College &		
Course Passed		
Professional		
Qualification		
0		
Occupation & Designation		
Designation		
Name of the		
Organization		
Address		
Phone No. &		
Email - ID		
Residential		
Address		
Phone No.		
Ex-student of		
Mongrace	Yes / No (Please tick)	Yes / No (Please tick)
(If yes, mention the year)	Year:	Year:
mic year j		
Hobbies		

Information about other Children: Name / Names **(1) (2) (3)** Name / Names of **(1)** their School / Schools **(2)** (3) **Ex-student of (1)** Mongrace / Year **(2) (3)**

Reference if any:		

Reason for seeking admission in Mongrace:		
read tl	he pros	rtify that the above information about our son / daughter / ward is true. We have spectus of your institution and agree to abide by the rules and regulations. We shall o-operation.
Date _		Signature of Parents:
		Father:
		Mother:
N.B.	1.	Application form is no guarantee for admission.
	2.	Parents of the selected candidate(s) will be informed over the telephone
	3.	Change of address & Telephone numbers if any, should be notified.
	4.	To be attached: a) Xerox copy of Birth Certificate. b) Xerox copy of any document as proof of the parent being an ex-student of Mongrace.
	5.	Application form along with the documents/enclosures must be submitted in a sealed envelope.
	6.	Please submit the Application/Admission Form along with a Demand Draft of Rs.100/- (Rupees One Hundred only) in favour of "Mongrace Montessori House".

Photocopy of educational qualifications of each parent.

7.