

# ENQUIRY FORM

Session 20  -

Date -  /  /



Name of the child: \_\_\_\_\_

Gender:                      Male                       Female

Class to which admission is sought: \_\_\_\_\_

Age as on 30th April 20: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Educational Qualification: \_\_\_\_\_

Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Educational Qualification: \_\_\_\_\_

Occupation: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Distance from School(kms.): \_\_\_\_\_

Source of enquiry:    Hoardings     Newspaper     Radio     CableTV   
                                 Friends     Direct Mail     SMS     Website   
                                 Events     Play School     Others

