



Smile Kids Montessori Pre-School

Gaindakot-2, Nawalparasi
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Application Form for Admission

Date:

Session:

Admission No :

Student's Name (in Block Letters)

Gender : Male ☐ Female ☐

Religion :

Date of Birth : (Enclose copy of Birth Certificate)

Place of birth : Nationality : Mother Tongue :

Faculty : Level : Program :

Class Applied For :

Father's Name : Qualification :

Mother's Name : Qualification :

Occupation : Father Mother :

Permanent Address :

Contact No : Email :

Guardian's Name : Relationship :

Address : Contact No :

Name Of The Previous School	Class	Year of study	Percentage / Grade

I declare that the details mentioned above about my child are true. I shall abide by the rules and regulations of this school

Parent's Signature

For Office Use Only

Student's Name : provisionally admitted class

Principal's Signature