Sl No. : ...../20-21/..... Admission No.:

HEMALATA HANDIQUI MEMORIAL INSTITUTE

Lichubari, P.O – Cinnamara, PIN – 785008, Jorhat,Assam
Contact number: 0376-2340150
Website: www.hhmi.edu.in , Email Id- hhmi.jorhat@gmail.com

REGISTRATION/ADMISSION FORM

A. Particulars of the Pupil:

1. Name in Full Master/Miss
.....
(BLOCK LETTERS) (First) (Middle) (Last)

2. Date of Birth (in figures) ...../...../..... (In words) .....
.....

3. Class in which admission is sought .....

4. Admission required for Girls Hostel Yes/No

5. Mother Tongue .....

6. Hometown .....

Attach a recent passport size photograph

7. Nationality ..... 8. Religion ..... Caste.....

9. Previous School 's Name & Address : .....
.....
.

10. Special interests .....

B. Particulars of the Father/Guardian:

1. Father/Legal Guardian's Name : .....
(First) (Last)

2. Educational Qulalification : .....

3. Profession/Designation :.....

4. Official Address .....

Telephone No. ..... Mobile .....

5. Residential Address .....

Telephone No. ..... Mobile .....

C. Particulars of the Mother:

1. Mother's Name .....
(First) (Last)

2. Educational qualification .....

3. Designation & office address if employed .....

D. Particulars of the Brother/Sister:

1. Name ..... Age .....

Studying at (if applicable) .....

2. Name ..... Age .....

Studying at (if applicable) .....

3. Name ..... Age .....

Studying at (if applicable) .....

I the undersigned hereby declare that I am the legal guardian of Master/Miss.....
..... and that the information provided in the form is correct to the best of my knowledge. I agree to abide by all the School rules. I understand that Registration does not mean qualification for admission. The written examination followed by interview process involves eligibility for admission.

Signature .....
Name .....
Relationship with Pupil .....
Date ..... Place .....

Note:
1. Original Birth certificate issued by the Govt. must be produced at the time of interview.
2. Photocopy of Original Birth certificate, Proof of Residential address and Marksheet of previous Examination must be attached with this form.

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FOR OFFICE USE ONLY

After Examining the Candidate, I found him/her fit for admission to Class : .....

Date : ...../...../..... Signature of the Principal