

BELIEVERS CHURCH RESIDENTIAL SCHOOL

SI.NO

P.O BOX 5, (ST.THOMAS NAGAR), KUTTAPUZHA P.O

THIRUVALLA 689103, KERALA Phone:2733404,2741562,2741563 E-mail: bcrsadmission@gmail.com

Recent photograph of the student.

REGISTRATION FORM FOR ADMISSION TO STD XI

[All entries to be made as per class X Registration]

1. Full nam	1. Full name of the pupil				
2. Expansion	of initials				
3. Sex	Sex		Female		
4. Age	Age		M	onth	
5. Date of Birth (as given in the birth certificate)		Date Month Year			
6. Name of Father					
7. Name of Mother					
8. Address for communication					
Mobilewhatsapp					
Email Id:					
9. Name of the school previously attended: 10. Combinations offered for choice (tick your option)					
Group I	Group II	our option	Group III	Group IV	
	•		orent my	Group IV	
English (Core) Physics Chemistry Maths Computer Science	English (Core) Physics Chemistry Biology Options(tick one) Mathematics Computer Science Psychology		English (Core) Accountancy Business Studies Economics Options(tick one) Mathematics s Informatics Practices	English Core History Economics Political Science Options(tick one) Psychology Informatics Practices Mathematics	
Signature of the Pupil Signature of Father Signature of Moth				gnature of Mother	
	January .			***	