## BRILLIANCE ACADEMY

## ERANHIPALAM, KOZHIKODE - 673 020

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email: brillianceclt@gmail.com

Affix recent passport size photograph

No:

## APPLICATION FOR ADMISSION

Please read the prospectus before filling the application form

1. Name of the student (in block letters)			
2. Age & Date of Birth			
3. Male or Female (Put a √ mark)	Male		Female
4. Religion & Caste			
5. Name of parent / guardian and his/her			
relationship to the student			
6. Occupation of parent / guardian			
7. Present Address (in block letters)		Permanent	Address (in block letters)
Din .			Dia
Pin:			Pin:
Ph: Mob:		Ph:	Mob:
8. Email address (if any)			
9. Class/ Course		Official ad	dress of parent/guardian (if any)
10. Medium Malayalam English			
11. Name of school studying or last attended			
, ,			
40. Durin La Colonia		Ph:	Mob:
12. Period of Study			
DI	ECLARAT	ION	
I hereby declare that my son/daughter will abide by			ution If he/she breaks the rules he/she
can be removed from the roll without further expla			
as and when required.			
	Parent/Gu	ardian	
Date : Signature of Student			
FOR C	FFICE US	E ONLY	
	bject:		Date of Admn:
Mode of payment:	Medium	: MAL	ENG
Office Seal:		- 1	Sign of Principal: