



TRINITY LYCEUM
FATIMA ROAD, KOLLAM - 691 013

Application for Registration 20..... - 20.....

(Submission of Application for Registration does not guarantee admission)

1. Name of the Pupil in full (in block letters) :
2. Date of Birth :
3. Sex : Male / Female
4. Standard to which admission is sought : LKG / UKG / Standard.....
5. Age as on the date of Registration : years months
6. Name of the Father :
- Name of the Mother :
- Address :
7. Location of Residence : Corporation (Ward Name)
Panchayat (Name)
8. Contact No. : Land Line Mobile
9. Educational Qualification of Father :
- Occupation of Father :
10. Educational Qualification of Mother :
- Occupation of Mother :
11. Official Address, if any, of the parents :
12. Total annual income of the family :
13. Schools previously attended, if any :
14. Religion and Community :
15. If Catholic, name of the Parish and Diocese :

16. Name of brother/sister studying at present in this school :

Standard and Division in which they are studying

17. Are you able to pay the monthly tuition fees and other special fees ? : Yes / No

Certified that the above given details are true to the best of my knowledge and belief.

Signature of Parent / Guardian

Place :

Date :