Received by: \_\_\_\_\_

## ST. MARY'S ACADEMY

Tulsa Road, Lalazar Rawalpindi Tel: 051-5152201, 5152202 Fax: 051-5152203

Received Date: \_\_\_\_\_

## AFFILIATED WITH FEDERAL BOARD

## REQUEST FOR THE ENROLLMENT FOR $\overline{HSSC}$ FOR THE $\underline{YEAR~2015\text{-}2017}$ $\underline{Note}$ : This form is no guarantee for admission

	applied for (Please tick the	· —	РНОТО	
Pre-Engineering	Pre-Medical	Computer Science	(With Blue Background)	
1. Student's Full Name:				
2. Date of Birth: D	ate of Birth (in words)			
3. Roll # Allotted (SMA students only	y)	Board Roll # of SSC		
4. Marks Obtained:Gr	ade:Board: _			
5. Previous School of the student:		Religion:		
6. Father's Name:		Occupation:		
7. Father's NIC#:	Student	's Form-B#:		
8. Phone # Residence	Mobile # (Father)	Office #		
9. Mother's Name:		Occupation:		
10. Mobile # (Mother)	10. Mobile # (Mother)Office #			
11. Res. Address				
12. Guardian's Name (in case father	is not alive or abroad):			
13. Address				
14. Phone: Residence	Office:	Mobile:		
DECLARATION BY PARENTS				
I	father/ guardian of		certify that the	
information given above if true to the best of my	knowledge and belief, if any	thing is found incorrect, we will accept		
made by the administration of SMA. Following	documents have been attached	d to the application form:		
<ul><li>a. 4 passport size photographs.</li><li>b. Attested photocopy of detailed mark sh</li></ul>	eet of SSC			
c. Attested photocopy of character certific				
d. Attested photocopy of NIC of father/ g				
e. Attested photocopy of B-Form				
I understand that the decision with regard to my all relevant consideration has been taken into acc Principal's decision as Final				
	Pare	nts Signature:		
Received By (Name / Signature)	/	(For office w	ise only)	
<b>Received By</b> (Name / Signature):PLEASE SEE INSTRUCTIONS OVERI	EAF	(For office t	ise om j	
	FOR OFFICE USE ON	NLY		
Reg #: H-2015-17 in				