



॥ विद्या सर्वार्थ सिद्धये ॥

G.D.SOMANI MEMORIAL SCHOOL

Cuffe Parade, Mumbai – 400 005. Tel. : 22187102

NOTICE

Registration forms for Class. XI to XII admissions for the academic year 2023-2024 will be available on www.gdsomani.org from Wednesday, 21st December, 2022 to Saturday, 21st January, 2023.

Registration form duly filled in with all enclosures should be submitted as follows :

Date for Submission of Registration Form	Time
Std. XI – XII - 25 th January, 2023	9:00 a.m to 12:00 noon

Note : Admission will be granted on the basis of merit.

B.D.Seymour

Principal

Dated : 15/12/2022

Website : www.gdsomani.org



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REGISTRATION FORM FOR ISC ADMISSION FOR 2023 - 2024

To,
The Principal,
G.D.SOMANI MEMORIAL SCHOOL,
Mumbai – 400 005

No.

LATEST PASSPORT
SIZE COLOUR
PHOTO OF
STUDENT TO BE
AFFIXED HERE

Dear Sir,

I desire to get my son / daughter / ward admitted in Std. _____ of your School with effect from _____

DETAILS ABOUT THE STUDENT:

- Name in Full: _____
(Surname) (First Name)
- Date of Birth: _____ Age (as on 1st June) _____ Years _____ Months
- Place of Birth : _____ 4. Mother Tongue: _____
- Name & Address of last School attended: _____

- Aadhar No. : _____

Last Examination Result:

	English	Lang. 1	Lang. 2	Social Studies	Math	Science	Computer	Choice 1	Choice 2	Total
Marks Obtained										
Out of										

DETAILS ABOUT THE PARENTS:

- Father's Name: _____
Academic Qualifications: _____
Professional Status: _____
Tel. No: _____ Mobile No. : _____

FATHER'S
LATEST
PASSPORT SIZE
COLOUR
PHOTO OF
STUDENT TO
BE AFFIXED
HERE

- Mother's Name: _____
Academic Qualifications: _____
Professional Status: _____
Tel. No: _____ Mobile No. : _____

MOTHER'S
LATEST
PASSPORT SIZE
COLOUR
PHOTO OF
STUDENT TO
BE AFFIXED
HERE

- Address (Resi.) : _____ (Offi.) : _____

Tel. No: _____ Mobile No. : _____

4. Supplementary Information:

Siblings in this institution.

- | Name | Std. |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |

Siblings in other institutions.

- | Name | Std. |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |

(P. T. O.)

Received Application Form No.

For Principal
G.D.S.M.SCHOOL

PARENT'S ASSURANCE :

1. I fully believe in the philosophy and practice of this school.
2. I agree to give full co-operation to you and your staff in your effort to improve the standard of education not only of my child, but also that of the school as a whole.
3. I promise to encourage my child to take part in the co-curricular, extra curricular activities and educational camp of the school including in House Games.
4. I enclose herewith a (i) Xerox Copy of the Municipal Birth Certificate, (ii) 10th Marksheet / Pre-Board / First Sem. Marksheet (iii) Aadhar Card Copy
5. I have read the rules and regulations laid down and I agree to abide by them. I will be responsible for my child's / ward's behaviour during his / her school career.
6. I understand that bus facility is subject to availability to seat.
7. I UNDERSTAND THAT REGISTRATION DOES NOT GUARANTEE ADMISSION.
8. FEES ONCE PAID WILL NOT BE REFUNDED UNDER ANY CIRCUMSTANCES.

Date _____

Father

Parent's Signature
Mother

(FOR OFFICE USE ONLY)

a) ACCEPTED REGISTRATION for Std. _____ for the academic year 2023 – 2024.

b) Admission granted in Std. _____

Principal

c) All relevant documents received and fees paid as per rules

Signature

For school Prospectus and Activities please visit our website: www.gdsomani.org

Please preserve this acknowledgement. Queries in person or Telephone **WILL NOT BE ENTERTAINED.**