



A CAVINKARE PATRONIZED SCHOOL

ENQUIRY FORM

Date: _____

Name of the student: _____

Father's Name: _____ Mother's Name: _____

Date of Birth: _____ Age _____ Gender: _____

Contact Number: Father: _____ Mother: _____

Email id: _____

Address: _____

Any siblings studying in CKS: Matric / KIDS / CBSE _____

Qualification: Father: _____ Mother: _____

Occupational Details: Father: _____ Mother: _____

Annual Income: Father: _____ Mother: _____

Religion: _____ Community: _____

Class opted/studying: _____

Previous School Name: _____

Reason for leaving the previous school: _____

GRADE XI COURSE PREFERENCE

- GROUP - I** (Maths, Physics, Chemistry, Biology)
- GROUP - II** (Maths, Physics, Chemistry, Computer Science)
- GROUP - II** (Physics, Chemistry, Biology, Computer Science)
- GROUP - VI** (Commerce, Economics, Accountancy & Computer Application)
- GROUP - V** (Commerce, Economics, Accountancy & Business Maths)

Heard us from: Newspaper / Advertisements / Facebook / Instagram / Word of mouth / Parent referrals,
others pls specify: _____

Parents Signature

Admission Coordinator