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Rig-Lam School, Choglamsar

1939-D No. Regd. Under Society Registration Act. Regd.

Adm. No. _____

S. No. _____

Date _____

ADMISSION FORM YEAR _____

Name of the pupils: _____

Male /Female: _____

Date of Birth: _____ Month: _____ Year: _____

Father's Name: _____

Occupation: _____ Qualification (Optional) _____

Mother's Name: : _____

Occupation: _____ Qualification (Optional) _____

Class in which seeking admission: _____

Family's monthly gross income: _____

Present Address: _____

Permanent Address: _____

Local Guardian: _____ Contact No.: _____

Child in (a) Paid scholar (b) Sponsored (c) Half sponsored: _____

Child is in the care of (a) Mother _____ (b) Father _____ (c) Both. _____

(d) Grand Parents _____ (e) Relatives _____ (f) Others _____

Contact Numbers in case of Emergency:

(a) _____ (b) _____ (c) _____

Sign. of Principal
Rig-Lam school

Signature of
Parents/ Guardian