



# Sacred Heart CMI Public School

(Affiliated to Central Board of Secondary Education, New Delhi. Affiliation No: 930616)

Thevara, Kochi – 682013, Kerala, India

## Student Application Form

Appl No: **20211717** Year of Admission: Class:

Name of Student: **Abelia Anna Johnson**

Date of Birth: 05-01-2006 Height: 166 Cm

Aadhar: 802468964437 Weight: 70 Kg

Gender: Female Blood Group: O+

Mother Tongue: Malayalam Nationality: Indian State: Kerala

Religion: Christian Cast: Marthoma Community: General

Previous Institution 1: India School Muscat (2019-20 IX)

Previous Institution 2: MARTHOMA RESIDENTIAL SCHOOL (2017-18 VII)

Residential Address Olickal House ,Kumbanadu Po , Koipuram ,Pathanamthitta  
Kerala - 689547, Kerala

Landline: 04692666930 Mobile: 9656289442, 9847130909

Permanent Address Olickal House ,Kumbanadu Po , Koipuram ,Pathanamthitta Kerala - 689547, Kerala

Mobile: 9656289442,  
9847130909

Father's Name: Johnson Mathew

Nationality: Indian State: Kerala Mother Tongue: malayalam

Mobile No: 7511108322 Email ID: sabujohnson@gmail.com

Qualification: Graduation Occupation: Manager

Office Address: Post box 1009,PC 114, Muscat ,Oman - 1009

Office Phone: 7511108322



Mother's Name: Rachel Johnson

Nationality: Indian State: Kerala Mother Tongue:

Mobile No: 9656289442 Email ID: reejohnson71@gmail.com

Qualification: Post Graduation Occupation: House wife

Office Address: -

Office Phone: 9656289442, 9656289442



Guardian's Name: Regi Mathews

Relation with the student: Mother's Brother

Nationality: Indian State: Kerala Mother Tongue:

Mobile No: 9847130909

Occupation: Business

Office Address: -

Office Phone: 9847130909

I solemnly declare that the particulars given about Abelia Anna Johnson in this application are true and correct.

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date of print 11/09/2020

Place \_\_\_\_\_

Date of submission

\_\_\_\_\_

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**For office use only**

Application verified by \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

If admission granted,

Student Reference No

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Student Admission No

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Date of Admission

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Name and Signature of the authorized signatory:

