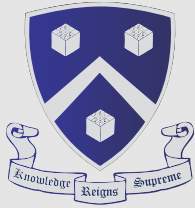


Reg No:



SALAMAT

REGISTRATION FORM

Paste one
1.5in x 1.5in
Photograph

Applying for: Elementary Campus Boys Campus Girls Campus

Class applied for: _____ Term 1st 2nd 3rd Academic Session 20 ____

Applicant Information

Please fill in block letters

Name of applicant: Last _____ First/Middle _____

Date of birth: -- (Day-Month-Year) Place of birth: _____

Gender: Male Female Religion: Islam Other _____

Home address: _____

Name of last school attended: (if any) _____

Dates school attended: (duration) From _____ To _____

Sibling/Kinship at SALAMAT (Current or Past) : Yes No

If yes, then fill below:

Student's Name	School	Class/Section	Year
1)			
2)			
3)			

Family Information

Father / Legal Guardian's Name: Last _____ First/Middle _____

Marital Status: Married Divorced Widower

Occupation: Housewife Employed Self - Employed Government Employee

Company / Department: _____

Designation: _____

C.N.I.C No: -- Mobile: -

Telephonic Residence: ()- E-Mail Address: _____

Address: Same as the student home address

Other: _____

Mother / Legal Guardian's Name: Last _____ First / Middle _____

Marital Status: Married Divorced Widower

Occupation: Housewife Employed Self - Employed Government Employee

Company / Department: _____

Designation: _____

C.N.I.C No: -- Mobile: -

Telephonic Residence: ()- E-Mail Address: _____

Address: Same as the student home address

Other: _____

Applicant's Health Information

Does the following applicant suffer from any of the following conditions?

Condition	Yes	Condition	Yes
Asthma		Epistaxis (nose-bleed)	
Diabetes		Hearing Problem	
Epilepsy		Long Sightedness	
Hay Fever		Short Sightedness	
Tuberculosis		Colour Blindness	
Eczema		Allergies	
Other (specify):			

State disability of applicant: (if any) _____

Blood Group: _____

Emergency Contact

Person to contact in emergency (other than parents):

Last _____ First _____

Relationship with applicant: _____

Mobile: - Telephonic Residence: () -

Home address: _____

Declaration of Parent / Guardian / Applicant

- I wish to register my son/daughter for admission to SALAMAT and understand that admission is subject to availability of seat and/or passing the admission test and interview. Rights of admission reserved by school management
- All information provided in this form is correct and accurate to the best of my knowledge
- I agree to the fee structure(s) proposed by the school and understand that from time to time the fee may increase as necessitated by the increase in the costs of providing a quality education. Moreover, I formally declare that I can afford the cost of education for my child and will ensure the timely clearance of all dues
- I agree to abide by all rules / regulations and make fee payments promptly and within due dates
- In case of any disagreement with the management of SALAMAT, [I will not involve SALAMAT or any of its staff into legal suit]
- I hereby declare that neither my ward nor I will ever indulge in any political activity related to the school or any activity that might harm the institution or its image in any respect
- Further, I have carefully read and understood the detailed 'Fee Rules and Information' attached with this form

Applicant's Signature

Parent/Guardian's Signature

Date

Documents Checklist:

- (i) N.I.C copy of Father / Legal Guardian & Mother
- (ii) 2 recent photographs of applicant
- (iii) Student's Birth Certificate (NADRA only)
- (iv) School Leaving Certificate from Last school attended

Received

Not Received

For Official Use:

Reg. Date: _____ Reg. No: _____ Test/Interview: _____ Time: _____

Accepted for admission to class _____

Pending interview assessment

Rejected

Comments: _____

Note:

- (i) Completion of this form does not guarantee admission. Rights of admission reserved
- (ii) Salamat School System ("SSS") may use this information as and when required for official school transcripts / results, correspondence and any other purpose as it deems appropriate.