



STUDENT'S INFORMATION (Academic Year 2025)

Class admission sought: _____, Date issued: _____

Full Name: _____ Gender : ___M / ___F

Date of birth : ___ / ___ / _____ Place of birth: _____

Residential address : _____

Residential telephone : _____

Mobile (for phone calls) : _____

Mobile (for SMS alert) : _____

Mobile (For Whatsapp) : _____



(Note: In case of the same number for all the above entries, please write AS GIVEN ABOVE or write the same number again but please don't leave it blank).

Blood group : _____

Past Education Record:

Last school's name: _____ Last class passed: _____

Languages spoken by student :1. _____ 2. _____

Any serious illness or allergies? : _____

Any physical impairment? : _____

Siblings already enrolled in The Fountain School, please write:

Name of the sibling: _____ Class: _____

Name of the sibling: _____ Class: _____

Name of the sibling: _____ Class: _____

PARENTS' INFORMATION

Father

Mother

Name : _____

NIC No : _____

Professional qualification : _____

Profession / occupation : _____

Designation : _____

Name of organization : _____

Office address : _____

Telephone Office : _____

Mobile : _____

Email : _____

IF APPLICABLE :

Name of guardian : _____

NIC No : _____

Relationship to child : _____

Mobile No. : _____