FORM NO:-

CMEF TRUST PRE PRIMARY SCHOOL QUEEN MARY SCHOOL BLDG. **V.P.ROAD, MUMBAI – 400 004.**

Tel: 022 69257577 / 022 69257477

(Preliminary data form seeking Admission to Nursery).

To, The Chairman, CMEF Trust V.P.Road, Mumbai	- 400 004.	Must attach photograph of parents here.	
Dear Sir,			
declare that the in	formation given below is form does not guarante	s true and accurate.	institution from March 2024. I hereby I fully understand the fact that the understand that the decision of the Yours faithfully Parent / Guardian
	TO BE FILLED BY PAR on about the child.	Attach child's	
Name	Father's Name	Surname	— photograph here.
	(WRITE IN BLOCK	LETTERS)	
(figu	res) (in words)_		
Religion	Natio	onality	
	n about the father		
Name and place of	the school attended		
Name and place of	the college attended		
Profession / Occupa		cialization (Give Deta	uils)

C.	Information a	mation about the Mother.					
Name	e if ex student give maiden name and the year/s						
Name	and place of the	college attended					
Educa	tional / Professio	onal Qualifications					
Profes	sion/Occupation	Designation and spe	cialization (Give Details)				
D.	Information al	bout sisters studying	g in Q.M.S. (Do not mention	n cousin sisters)			
Name		Age	Relationship	Class/Year			
Е.	Information al	bout brothers and s	isters studying in other sch	ools.			
Name		Age	Relationship	Class/Year			
F.	1. Complete residential Address including telephone Nos and E-mail address						
	2. Complete Office Address including telepone Nos and E-mail address						
	3. How many other girls in your building or neighborhood come to Q.M.S?						
	4. Why do you want to educate your child in Queen Mary School?						
	5. Are you willing to assist the School in its development projects? In what way?_						
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