

ST.THOMAS HIGHER SECONDARY SCHOOL, MUKKOLAKKAL, TVM-43

REQUEST FORM FOR HIGHER SECONDARY COURSE (2026-27)

Please affix photo
here

1. Name of the Applicant (In Block Letters) :

2. Sex (Male/Female):

3. Age & Date of Birth:

(as on 1st June,2026)

4. Name & Occupation of Father:

5. Name & Occupation of mother:

6. Permanent Address of
Father/Mother with Pin code:

7. Temporary address if applicable:

8. Mobile No. of Father

Mobile No. of Mother

Local Guardian if any : Name Contact No.

9. Religion & Caste/Community:

(If Marthomite specify Parish)

10. Group & Subject combination in order of preference:

**Groups offered & Subject Combination
(Mention the subject combination)**

Write the subject combination

1. Physics, Chemistry, Maths, Computer Science

1.

2. Physics, Chemistry, Maths, Biology

2.

3. Commerce

3.

(Business Studies, Accountancy, Economics, Computer Application)

11. Does the student have any learning disability. If so, give details:

i)Whether availed any special privilege for the learning disability in Std.X Examination:

12. (i)Name & Address of the School in which:

The applicant studied for the SSLC or Equivalent
Examination

(ii)Medium of Instruction:.....

11.(a) No.of chances taken for passing the SSLC:.....

or equivalent examination

(b) Reg.No.Month & Year of appearance :

12.Boarding facility required? Yes/No

Declaration :- All details given in this request are true, any lapses in this regard will render the application avoid & admission if obtained is liable to be cancelled.

Signature of Candidate

Place:.....

Date:

Signature of Parent/Guardian with Name

Admissions will be as per the government procedure

Request forms can be mailed to sthsslateraladmission@gmail.com OR sthsstvm@gmail.com