



ST. MARY'S CONVENT INTER COLLEGE

MANAK NAGAR, R.D.S.O., LUCKNOW – 226011

NOTICE

1. Day and Date of Admission for **Class Prep**

Date / Day	Time
30 th April, 2024 (Tuesday)	9:00 AM -10:30AM

2. Admission form must be filled in by the **Father/Mother of the Child**.
3. **The Counterfoil of the Registration form and one passport size photo along with the Affidavit on ₹ 100/= stamp paper must be brought at the time of admission.**
4. The qualified candidates, who do not take admission on the appointed date & time will forfeit their seat.
5. Admission form should not be taken outside the school gate.
6. Fees to be submitted in the School office on the day of admission by **DD ONLY**.
 - a) **Admission Fee: - Rs. 20,000/=**
 - b) **Quarterly fee for April – June:- Rs . 9,740/=**
7. **Total Fee:- Rs. 29,740/= (DD to be drawn in favour of St. Mary's Convent Inter College, Payable at Lucknow)**
8. Fees once submitted will not be refunded at any case.

NOTE – Kindly do not bring your ward on the day of admission.



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AFFIDAVIT

**Before: The Principal,
St. Mary's Convent Inter College
Manak Nagar, Lucknow-226011**

Affidavit on behalf of _____ (Father's Name as per the School certificate), Aadhar No. -
_____ S/O or D/O _____ R/O _____ (Address)

I, the above named deponent, do hereby solemnly affirm and state an oath as under-

1. That the deponent is the father of _____ (Child's Name) and as such well conversant with the facts of this affidavit.
2. That _____ (Child's Name) was born on _____ (Date of Birth as per the certificate), which is his/her actual and true Date of Birth.
3. That correct date of birth of deponent's son/daughter _____ (Child's Name), be recorded in the interest of justice.
4. That the correct name of the Mother of _____ (Child's Name) is _____ (Mother's Name) Aadhar No.- _____

Deponent _____

Verification: I, _____ (Father's Name), the deponent do hereby verify that the contents disclosed above in para 1,2,3 and 4 are true and correct to the best of my knowledge and verified this on _____ (Court Name and Address)

Deponent _____