S.No-



HOLLOTOLI SCHOOL

C.B.S.E. AFFILIATION NO. 1430012 N.H. – 29, PADAMPUKHIRI, DIMAPUR-797116 [NAGALAND]

2: 8415924391

Email: admission@hollotolischool.com

РНОТО

REGISTRATION FORM: 2025-2026

1. Name of the student (As per Birth Certificate).
2. Date of Birth.
Day Month Year
3. Date of Birth (in words):
4. Father's Name:
Qualification: Occupation:
Address:
Tel:
5. Mother's Name:
Qualification: Occupation:
Address:
Tel:
6. Last School Attended:
Address:
Last class passed:
7. Siblings studying in Hollotoli School (if any):-
Name Class
i
ii. ———————————————————————————————————
iii. ——————————————————————————————————
8. Class to which admission is sought:

Dear Parents/Guardians,
Thank you for your interest in our School. You are kindly requested to fill up this open-
ended questionnaire as part of the admission procedure.
1) How did you get to know about Hollotoli School? Through family Through friends Through media Others (Please mention below)
2) What is the reason(s) that made you choose this school?
3) What are your expectations from the school?
4) What role do you play in your child's education?

5) How do you deal with your child's misbehaviour?
6) According to you, how important is discipline in the school?
I hereby certify that the particulars provided by me are correct to the best of my knowledge. I am fully aware of the rule that registration is not a guarantee for admission and that my child/ward must take the entrance test or qualify for admission to the appropriate class. The decision of the management shall be final.
Dated: Signature of the Parent/Guardian

FOR ONLINE REGISTRATION

Note:

- * Registration fee payment of Rs. 1500 has to be made in online mode.
 - Account Name: HOLLOTOLI SCHOOL
 - ACCOUNT NO: 910010039383177
 - IFSC CODE: UTIB0001128
 - BRANCH: Axis, Purana Bazar, Dimapur

Dear Parents/Guardians,

Kindly attach the screenshot of the payment receipt/payment along with the filled in Registration form and mail it to admission@hollotolischool.com