



ଚୋଇକୋରିଙ୍ଗ ମିଡ଼ଲ ସ୍କୁଲ

CHOEKHORLING MIDDLE SECONDARY SCHOOL  
DEKILING, SARPANG

"ACADEMIC EXCELLENCE THROUGH WHOLESOME EDUCATION



Date:.....

### ECCD ADMISSION FORM

Name:..... Gender: .....

Date of Birth:.....

Father Name:..... Occupation:.....

Village:..... Gewog:..... Dzongkhag:.....

Contact No:..... CID No:.....

Mothers Name;..... Occupation:.....

Village:..... Gewog:..... Dzongkhag:.....

Contact No:..... CID No:.....

**Parents Address:**..... **Contact No:**.....

**Signature of Parents/Guardians**