

Office Use only
Sunday school Registration No :
Date of Registration :

MAR THOMA SUNDAY SCHOOL SAMAJAM

FORM FOR SUNDAY SCHOOL REGISTRATION

1 Name of the Sunday School

2 Name of the Parish

3 Diocese

4 Centre/Zone

5 Details regarding Divisions :

a. Total Students in each divisions

Nursery	Beginner	Primary
<input type="text"/>	<input type="text"/>	<input type="text"/>
Junior	Intermediate	Senior
<input type="text"/>	<input type="text"/>	<input type="text"/>
Young Adult	Proudavakup	
<input type="text"/>	<input type="text"/>	

b. Total Students

Boys	Girls	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>

c. Total Teachers

Male	Female	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>

6 Name & Address of the HM

7 Name of the Vicar & Address

We agreed to conduct Sunday School according to the instructions of Mar Thoma Sunday School Samajam.

Signature - Vicar

Signature - Head Master

To be filled by the office

Register Number

Centre/Zone

Name of the vicar who recommended for registration

Date of Registration

Name & Signature of General Secretary

Office Seal