

GMOA Membership No :

Serial No :

**Year One School Admission of Children of GMOA Members– 2012/2013/2014/2015/2016/2017/2018  
(Fill In Block Letters)**

1. Name of the Applicant (Full)

2. Name of the spouse(if doctor)

3. Permanent Address  
(For mailing purposes)

4. Contact No.

Mobile

Home

E mail

5. Current Station

Designation

6. Name of the Child

7. Under Which Category the application / applications are made (Tick) :-

Transfer

Chief Occupant

Sub Occupant

OBA/OGA

Brother/Sister

Overseas

8. Details of Applications / Interviews (Please fill following details accurately)

No.	Name of School / Schools	Category	School Reference No.	Projected Score
1				
2				
3				

9. Special Contributions made to the GMOA

Present Branch Union

Executive Committee Member

General Committee Member

Branch Union Officer Bearer

If "Yes" for any of above, specific details: .....

.....

I certify that the above particulars are accurate.

.....  
Date

.....  
Signature

I confirm that the applicant is an active GMOA member and devoted to wellbeing of colleagues

.....

Name of the Secretary/Branch Union

.....  
Signature.