LOYOLA HIGH SCHOOL, PATNA-800010 ADMISSION NOTICE-2024-2025

LOYOLA MONTESSORI SCHOOL (MONT-II)

ADMISSION IN LOYOLA HIGH SCHOOL CLASS:-I

INTERACTION RESULT

ADMISSION DATE:-18-03-2024 (Monday)

FORM	M NO			TIMII	NG: 0	8:30	4.M	09:30	A.M.
101	102	103	104	105	106	107	108	109	110
111	112	113	114	115	116	117	118	119	120
121									
FORM	M NO			TIMI	NG:0	9:30	4.M	10:30	A.M.
122	123	124	125	126	127	128	129	130	131
132	133	134	135	136	137	138	139	140	141
142									
FORM	M NO			TIMI	NG: 1	0:30	4.M	11:30	A.M.
143	144	145	146	147	148	149	150	151	152
153	154	155	156	157	158	159	160	161	162
163									
FORM NO TIMING: 11:30 A.M 12:30 P.M						P.M.			
164	165	166	167	168	169	170	171	172	173
174	175	176	177	178	179	180	181	182	183
184									

PRINCIPAL

Date: 15-03-2024

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LOYOLA HIGH SCHOOL, PATNA-800010 ADMISSION NOTICE-2024-2025

LOYOLA MONTESSORI SCHOOL (MONT-II)

ADMISSION IN LOYOLA HIGH SCHOOL CLASS:-I

INTERACTION RESULT

ADMISSION DATE:-19-03-2024 (Tuesday)

FORM NO				TIMING: 08:30 A.M 09:30 A.M.							
185	186	187	188	189	190	191	192	193	194		
195	196	197	198	199	200	201	202	203	204		
205											
FORM NO				TIMI	TIMING: 09:30 A.M 10:30 A.M.						
206	207	208	209	210	211	212	213	214	215		
216	217	218	219	220	221	222	223	224	225		
226											
FOR	M NO			TIMI	NG : 1	10:30	A.M	11:30	O A.M.		
227	228	229	230	231	232	233	234	235	236		
237	238	239	240	241	242	243	244	245	246		
247											
FORM NO			TIMING: 11:30 A.M 12:30 P.M.								
248	249	250	251	252	253	254	255	256	257		
258	260	261	262	263	264	265	266	267	268		
269											

PRINCIPAL
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Date: 15-03-2024

LOYOLA HIGH SCHOOL, PATNA-800010 ADMISSION NOTICE-2024-2025

LOYOLA MONTESSORI SCHOOL (MONT-II)

ADMISSION IN LOYOLA HIGH SCHOOL CLASS:-I

INTERACTION RESULT

ADMISSION DATE:-20-03-2024 (Wednesday)

FOR	M NO			TIMI	NG: 0	8:30	A.M. -	09:30	A.M.
270	271	272	273	274	275	276	277	278	279
280	281	282	283	284	285	286	287	288	289
290									
FOR	M NO			TIMI	NG: 0	9:30	A.M. -	10:30	A.M.
291	292	293	294	295	296	297	298	299	300
301	302	303	305	306	307	308	309	310	311
312									
FOR	M NO			TIMI	NG:1	0:30	A.M. -	11:30	A.M.
313	314	315	316	317	318	319	320	321	322
323	324	325	326	327	328	329	330	331	333
334									
FOR	RM NO TIMING: 11:30 A.M 12:30 P.M						P.M.		
335	336	337	338	339	340	341	342	343	344
345	346	347	348	349	350	351	352	353	354
355									

PRINCIPAL
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Date: 15-03-2024

DOCUMENTS REQUIRED AT THE TIME OF ADMISSION: -

- 1) Two Passport size Photographs with parents (Combined)
- **2)** Original T.C. (Loyola Montessori School)
- **3)** Original Physical Fitness Certificate (Format Attached Below)
- **4)** Photocopy of Birth Certificate.
- **5)** Photocopy of Blood-Group (Lab).
- **6)** Photocopy of Aadhar Card of the student. (If Available).
- **7)** Photocopy of Paid Fee detail slip.
- **8)** One of the Parents (Mother/Father) must be Present at the time of Admission.
- **9)** Fee is to be deposited in South Indian Bank (Loyola High School Campus, Patna) of the academic session (April 2024 March 2025) in **Cash** or **Demand Draft** in favor of Loyola High School, Payable at Patna
- **10)** School Fee can be paid through **ONLINE MODE** also, the Link will be Available on school website:- www.lovolapatna.edu.in
- **11)** Fee is to be paid before the Admission Date(Its One-Time Payment & Non-Refundable)
- 12) Those Candidates who do not take Admission on the above given dates & time will forfeit their seats.
- **13)** ORIENTATION DAY :- **06-04-2024 (Saturday).**
- 14) Books will be available in the school campus on 03RD APRIL 2024 (Wednesday) Timing 08:00 a.m. to 12:00 Noon.
- 15) NEW ACADEMIC SESSION (2024-2025) BEGINS :- 08-04-2023 (Monday).

Note:

Please bring the **Admit Card** to collect the Blank Bank Deposit Slip from the Loyola High School Office (LHS) on **16-03-2024 (Saturday).**

Timing is from - 09:00 A.M. to 12:00 Noon.

Principal

PHYSICAL FITNESS CERTIFICATE

For THE ADMISSION IN LOYOLA HIGH SCHOOL, PATNA-800010

(To be examined and certified by a registered Medical Practitioner)

I, Dr		
after careful	personal examination of the	case do hereby certify that
(Child Name)		
S/o / D/o (Mo	ther)& (!	Father)
is found physi	ically fit to undergo formal school	ol education.
Based on the	clinical examination I, certify th	nat he /she is in normal state
of Health and	free from any communicable of	r non-communicable disease
or physical de	efects/infirmity which may inte	rfere with his/her schooling
including the	active outdoor activities.	
The immuniza	ation status and records are up-t	o date.
His/Her	Height:Cm	Weight:Kg
	Chest : Cm	Vision:
_	ire & Seal Practitioner	
Name	:	
Designation	:	
Reg No.	:	
Date	:	
Place		