Form 3

INFORMATION REQUIRED FOR PRINTING ON GOA ARCHDIOCESE DIRECTORY

EDUCATIONAL INSTITUTION DATA

**[Please write in Capital letters]**

**[Tick Mark in the box where necessary]**

[ ]  Pri-Primary School [ ]  College

[ ]  Primary School [ ]  Special School

[ ]  High School [ ]  Technical Institution

[ ]  Higher Secondary [ ] Others Click here to enter text.

|  |  |
| --- | --- |
| **Sr.** | **Particulars** |
| 1. | Name of the Institution: Click here to enter text. |
| 2. | Name of the Head: Click here to enter text.Designation: [ ]  Headmaster [ ]  Headmistress [ ]  Principal [ ]  In-Charge  [ ]  Any Other Click here to enter text. |
| 3. | Complete Address with Pin Code: Click here to enter text. Click here to enter text. Click here to enter text. Click here to enter text. Pin Code: Click here to enter text. |
| 4. | Institution Landline No: Click here to enter text. Institution Mb. No.: Click here to enter text. |
| 5. | Institution Email Id: Click here to enter text. Institution Website: Click here to enter text.Institution Youtube: Click here to enter text. |
| 6. | Any Other Information: Click here to enter text. Click here to enter text. Click here to enter text. |

\*Note:

⮚ Kindly download the form, type the details in the space provided and email it back to dcscmgoa@gmail.com

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