

B. FAMILY INFORMATION

Single Parent

Tick one, only if applicable Father or Mother

Father / Guardian:

Name:	Age:	Nationality:
Educational Qualification:	Institution:	
Occupation:	Office Address:	
Designation:		
Annual Income:	Mobile No.:	

Mother / Guardian:

Name:	Age:	Nationality:
Educational Qualification:	Institution:	
Occupation:	Office Address:	
Designation:		
Annual Income:	Mobile No.:	

Details of Brothers / Sisters of the student

Name	Age	Name of the Institution	Standard

Incase of Staff's ward:

Name of the Parent:

C. DETAILS OF PREVIOUS STUDY

Year	Name of the school Studied	Standard / Grade	Grade / Marks obtained in final exams

The Previous School affiliated to : STATE BOARD CBSE ICSE Other

Awards won so far in Sports, Arts, Academics, etc...

D. MEDICAL DETAILS OF THE CHILD

Any Medication taken for general well-being of the child.

Any medication taken for any medical condition, such attention deficit / thyroid (hypo / hyper) / any other condition.

Does the child have any difficulty in seeing? Yes No

Any Consultation with doctor done: Yes No

If yes, Explain : _____

Any Allergy / any medical information that school should be aware of:

E. ENCLOSURES (All documents are mandatory at the time of admission)

- Birth Certificate Photocopy
- Transfer Certificate Original
- Community Certificate Photocopy
- Passport size photo (5 copies)
- Aadhar Card Photocopy
- Vaccination Card Photocopy (if required)
- Progress Report Photocopy - Previous year (only for new admission from other schools)
- Transport From (if required)

The above documents (recently attested photocopies) must be produced along with the filled application from

Please Note : Staple all documents to the left-hand corner of the application

How did you hear about our school?

Name of the Newspaper

Name of the Magazine

Website

Other

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F. DECLARATION

I _____ have the authority to admit my child / ward _____ , into the school as the parent / legal guardian. I undertake the responsibility of providing any evidence needed to support the information provided here, if necessary for any reason. I declare that the statements provided in this application are correct to my knowledge and if found otherwise. I shall abide by the decision of the management. I agree to abide by the rules, regulations and the fee structure of the school.

Date of Submission:

Place:

Signature of Parent / Guardian

FOR OFFICE USE ONLY

Master / Miss / Baby : _____

Standard / Grade / Class: _____

Group : _____

Date : _____

Admission Co-ordinator

Principal