



II - Parent's Details (*please fill in capital letters*)

Father

Recent Passport
Size Photograph

Mother

Recent Passport
Size Photograph

Title (Mr / Ms):	<input type="text"/>	<input type="text"/>
Full Name as on Aadhaar Card:	<input type="text"/>	<input type="text"/>
Aadhaar Card Number:	<input type="text"/>	<input type="text"/>
Highest Qualification:	<input type="text"/>	<input type="text"/>
Occupation:	<input type="text"/>	<input type="text"/>
Designation:	<input type="text"/>	<input type="text"/>
Annual Income:	<input type="text"/>	<input type="text"/>
Income Tax Payer:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
PAN Number:	<input type="text"/>	<input type="text"/>
Office Address:	<input type="text"/>	<input type="text"/>
Office Phone Numbers:	<input type="text"/>	<input type="text"/>
Mobile Numbers:	<input type="text"/>	<input type="text"/>
E-mail Address:	<input type="text"/>	<input type="text"/>
Mother's Working Hours (<i>applicable for working mothers only</i>):		<input type="text"/>
After school hours, the child will be looked after by:		<input type="text"/>

III - Student's Sibling Details

Name:	<input type="text"/>	Grade:	<input type="text"/>	School:	<input type="text"/>
Name:	<input type="text"/>	Grade:	<input type="text"/>	School:	<input type="text"/>



VI - Student's Medical Record

Blood Group:

Weight (in kg):

Height (ft / in):

Right Eye (V):

Left Eye (V):

Right Ear:

Left Ear:

Teeth Occlusion:

VII - Is the child allergic to any of the following medicines used for first-aid in school?

Spasmindon, Meftal and Pudinhara for Stomach ache Yes No

Crocic, Disprin and Combiflam for Fever, Cold, Body ache Yes No

Stemetil for Nausea Yes No

Dettol and Savlon for External Application Yes No

Alerid for any Allergy Yes No

Any other specific allergies must be notified below:

Chronic ailments: Asthma, convulsions, etc. must be intimated below:

Name and phone number of family doctor / physician / pediatrician:



ADMISSION REQUIREMENTS for KINDERGARTEN to GRADE I

1. Birth Certificate
2. Aadhaar Card (parents' and child's) / PAN Card / Ration Card / Voter ID Card
3. Photographs (2 copies each of child and both parents)
4. Caste Certificate (If the child belongs to SC / OBC / BC-A / BC-B, then provide)

ADMISSION REQUIREMENTS for GRADE II to GRADE V

1. Birth Certificate
2. Transfer Certificate from previous school
3. MIS Portal Transfer Certificate (if applicable)
4. Migration Certificate where applicable
5. Photographs (2 copies each of child and both parents)
6. Aadhaar Card (parents' and child's) / PAN Card / Ration Card / Voter ID Card
7. Caste Certificate (If the child belongs to SC / OBC / BC-A / BC-B, then provide)

CHECK LIST for DOCUMENTS ATTACHED *(please tick)*

- | | | |
|--|------------------------------|-----------------------------|
| 1. Copy of birth certificate | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Two passport size photographs each of mother and father | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Two passport size photographs of child | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Original transfer certificate from previous school (if applicable) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. Original MIS portal transfer certificate from previous school (if applicable) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 6. Photocopy of original mark sheet of last examination passed (if applicable)
<i>(only for the examinee age group)</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 7. Copy of residential / address proof | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 8. Aadhaar Card (parents' and child's) / PAN Card / Ration Card / Voter ID Card | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 9. Caste certificate (if applicable) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |



DECLARATION

I, Mr / Ms

Parent / Guardian of

acknowledge that school rules and policies as well as its fee structure may change from time to time, sometimes due to external factors such as changes in the law, ministry regulations, guidelines or market conditions. I am fully aware that the fee once paid is not refundable or transferable under any circumstance. I also agree that school accepts no liability for the services provided and I agree to indemnify the school for the same. Hereby, I certify with my signature that all statements in this document are true.

NOTE:

1. Submission of this form is not a guarantee of admission.
2. Registration fee (if any) is not refundable.
3. Selected candidates are required to deposit the fee and complete the admission formalities within the stipulated time, otherwise they will forfeit their claim to admission.

Date / Month / Year

Father's Signature

Mother's Signature

Guardian's Signature

FOR OFFICE USE ONLY

Principal's Remarks:

Principal's Signature:

Date of Admission:

Admission Number:

(To be filled by the office)

I have checked the form and it is complete with the required attachments.

Name and Signature of the Scrutiny Officer: