

Class in which admission is sought	Session	Application Form Number	
Date of form collection	Date of Interview	Date of Form	
	(if any)	Submission & admission	

DOCUMENT CHECKLIST							
J 1	irth Certificate child	☐ Address Proof of Child & Parents	☐ Photocopy of Vaccination Car	☐ Transfer Certificate from d Previous School			
Please affix latest Passport size photograph in color		Please affix latest Passport size photograph in color		Please affix latest Passport size photograph in color			
STUDENT		MOTHER		FATHER			

DETAILS OF STUDENT

1.	Full Name (In Capital letters)	Surname	First Name		Middle Name						
2.	Date of Birth	MM/DD/YY	3 Age as on March 31,20		3 Age as on March 31,20 Years Months Days			S			
4(a)	Nationality		4 (b) Gender		4 (b) Gender MALE FEMALE 3 RD GE			D GEI	NDER		
5(a)	Aadhar		5	5(b) Languages spoken							
	Number				at home						
6(a)	Religion		6	(b)	Category (please	GEN	SC	ST	OBC	EW	SOTH
					Attach certificate)						
7(a)	Current School	School Name &	7(b) No. & Date of TC								
	& Class	Address			Issued by School						
8(a)	Blood Group		8(b)Any special physical								
			condition (pls specify)								
9	Address										

Declaration by parents/Guardians

I/We hereby declare that the above information furnished on this form is true and best to our knowledge and that we hereby certify that all parts of the information furnished is accurate. We are aware that furnishing of false information is a criminal offence punishable by Law.

(Signature)	(Signature)			
Mother's Name	Father's Name			