

YEAR APPLIED FOR _____

FOR OFFICE USE ONLY

DATE OF SUBMISSION _____

Admission for : Day Boarding ☐

Hostel ☐

REGISTRATION FORM

NAME

SURNAME

(Title / Family Name)

MIDDLE NAME

FIRST NAME

AFFIX
STUDENT'S
PHOTOGRAPH

DATE OF BIRTH

DAY

MONTH

YEAR

Date of Birth in Words _____

Sex (Male / Female) _____

Year applied for _____

Class applied for _____

Age on 1st April of the Year Applied for : _____

YEARS

MONTHS

FULL NAME OF

Father _____

Mother _____

EDUCATIONAL QUALIFICATION

Father _____

Mother _____

OCCUPATIONAL DETAILS

FATHER

MOTHER

NAME OF THE
EMPLOYER (COMPANY) _____

PARENT'S DESIGNATION _____

ADDRESS _____

DISTRICT _____

FOR OFFICE USE ONLY

Application Received on _____

Registration No. _____

AFFIX
PHOTOGRAPH

FATHER

Sign. of Father

AFFIX
PHOTOGRAPH

MOTHER

Sign. of Mother

AFFIX
PHOTOGRAPH

LOCAL GUARDIAN

Sign. of Local Guardian

SIBLING SPECIFICATION (BLOOD BROTHER / SISTER) IF STUDYING IN THE SAME SCHOOL OR APPEARING THIS YEAR

Name _____ Class Entry _____

FOR COMMUNICATION BY SCHOOL

FATHER

MOTHER

Address _____

P.O. _____ District _____

P.O. _____ District _____

Telephone No. with STD code _____

Mobile No. _____

Email ID _____

Permanent Address _____

LOCAL GUARDIAN (Please give the details for leaving a message, if needed)

Name _____

Address _____

Telephone No. with STD _____ Mobile 1. _____

Email Address _____ Mobile 2. _____

Religion _____ Nationality _____ Caste (SC/ST/OBC/Others) _____

In case of SC/ST/OBC/OTHERS You are required to submit the attested copy of Certificate

Aadhar No. _____ SSSMID _____ Family ID _____

Student Bank Account No. _____ IFSC Code _____

Bank Name & Address _____

Name and Address of the school presently studying : _____

Physically Inability if any _____

ANY ACHIEVEMENT IN SCHOOL

Games _____

Co-Curricular Activities _____

AGREEMENT & DECLARATION

I _____ (Name of the Parent / Legal Guardian), understand and agree that

(a) Registration does not mean qualification for admission.

(b) If the candidate is offered admission then I will abide by the rules and regulations of the School, pay the term fee in advance and settle any other accounts promptly.

(c) I declare that I am the Parent / Legal Guardian of the candidate.

(d) All disputes are subject to Indore jurisdiction only.

Date _____

Signature _____

Place _____

Name in Block letters

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Relationship with the candidate _____

ENCLOSURES :

- Photocopy of the candidate's Birth Certificate issued by a competent village / municipal / Govt. Authority or by a Registered Nursing Home or Medical Practitioner who has delivered the child with their medical Registration number (Affidavits or School Certificates are not acceptable)
- Duly attested Marksheet of the last qualifying examination.
- Registration fee, which is neither transferable nor refundable.