Addr	PSS :	•••
Telep	hone No. :	
Blood	group of the Child :	
Is the	child physically challenged (if yes, then please give details)	***
	child allergic to anything:	
	child diabetic /Asthmatic/Epileptic :	
	ther Medical history or information about the child :	
	se attach Doctor's Record /Reports wherever needed)	
	ies and activities in which the candidate is interested:	***
	u require school transport for the child : Yes / No	
Do yo	u have any Brother or Sister of the child in this school:	
If Yes	(Name	***
	CERTIFICATE FROM PARENTS/ GUARDIANS	
1.	We hereby certify that all the information provided by us in the form is correct.	
2.	We undertake to abide the School Rules .	
3.	Admission is subjected to submission of all supporting documents.	
4.	We accept that the decision of the Principal will be final.	
Signa	ture : Father :	
	Mother :	
	Guardian :	
Encl	osures:	
1.	This form must be accompanied by :	
a.	This attested photocopy of the child's Birth certificate issued by the relevant municip corporation.	al
b.	Academic reports of the last class studied in from previous school.	
c.	Four recent passport size color photographs of the child and one colors photograph each of fath and mother.	er
d.	Transfer certificate countersigned by a relevant authority. (class 1st onwards)	
e.	Proof of Residence- a photocopy of the Electoral card/Passport / Driving License / Telephone B Copy of Aadhaar Card.	ill.
2.	Please do not attach any other annexure.	
3.	Both parents must accompany the child for the meeting with the principal and staff.	
4.	Admission to a child is confirmed after submission of all relevant documents.	
	FOR OFFICE USE ONLY	
1.	Registered on :	
2.	Admission Test on :	
3.	Interview on :	

4.

Admission No.