

LAKSHAY INTERNATIONAL SCHOOL NAULTHA

ADMISSION form

202_ - 202_

NAME _____

CLASS _____

HOUSE _____

VILLAGE _____

LAKSHAY INTERNATIONAL SCHOOL

APPLICATION FORM

Affix
Coloured
Passport Size
Photograph
Of Student

ADMISSION IN SOUGHT CLASS For hostel / day scholar

PARTICULARS OF STUDENT (to be filled in blocked letters)

Child`s Name

Date of Birth (DD/MM/YYYY)

Date of birth (in words)

Age as on 1st April of the Academic Section Year Month Days

Nationality of child Mother Tongue

Religion Gender

Category GN OBC SC ST URBAN RURAL

STAFF/ WARD

Student Aadhaar no Family ID no

Blood Group

SIBLING DETAILS

NAME	D.O.B	CLASS	SCHOOL	CONCESSION

DECLARATION

- ✓ I KNOW THAT FEES ONCE DEPOSITED IS NOT – REFUNDABLE AND ISSUE OF ADMISSIONS FORM DOES NOT GIVE GURNTTEE OF ADMISSION
- ✓ I HAVE MADE CAREFUL NOTE OF VARIOUS DETAILS REGARDING THE PAYMENT OF SCHOOL FEES. I HAVE MADE SATISFACORY ARRANGEMENTS FOR REMITTANCE OF SCHOOL FEES BY DUE DATES WITHOUT ANY REMINDER FROM THE SCHOOL OTHERWISE LATE FEE FINE SHALL BE PAID BY ME I WILL PAY THE SCHOOL FEES BY ERP PORTAL OR BANK TRANSFER IN FAVOUR OF LAKSHAY INTERNATIONAL SCHOOL NAULTHA AS PER RULES. I FULLY UNDERSTAND THAT THE FEE ONCE DEPOSITED WILL NOT BE REFUND IN ANY CASE
- ✓ I HEREBY STATE THAT DATE OF BIRTH AND SPELLINGS OF NAME OF MY CHILD /WARD GIVEN IN THIS FORM ARE CORRECT TO THE BEST OF MY KNOWLEDGE AS PER DOCUMENTS SUBMITTED
- ✓ I SHALL READ CAREFULLY ALL THE RULES , REGULATIONS AND PROCEDURES LAID DOWN IN THE SCHOOL ALMANAC AND BEING DESIROUS OF HAVING MY CHILD/WARD EDUCATION IN LAKSHAY INTERNATIONAL SCHOOL NAULTHA . I HEREBY AGREE TO ABIDE BY THEM IN ALL RESPECTS .
- ✓ I UNDERSTAND THAT THE DECISION OF THE MANAGEMENT OF THE SCHOOL SHALL BE FINAL AND BINDING ON ME
- ✓ I HEREBY CERTIFY THAT MY WARD AND I WILL FOLLOW THE RULES , REGULATIONS AND PROCEDURES LAID DOWN BY THE SCHOOL FROM TIME TO TIME . DECISION OF THE SCHOOL AUTHORITY SHALL BE BINDING ON ME IF HE/SHE BREACH DISCIPLINE
- ✓ ONE MONTH ADVANCE NOTICE SHALL BE GIVEN BY ONE FOR DISCONTINUATION OF STUDY OF THE CHILD IN THE SCHOOL
- ✓ I UNDERSTAND THAT THE BUS FEE IS PAYABLE FOR 11 MONTHS (APRIL TO MARCH , EXPECT JUNE) THE SCHOOL WILL NOT ACCEPT NOTICE REGARDING DISCONTINUATION OF BUS FACILITY IN THE MID SECTION
- ✓ I HERE BY PUT MY SIGNATUE TO CONFIRM THHE ABOVE DECLARATION

DATE __/__/__

PLACE _____

SIGNATURE OF PARENT /GUARDIAN

DETAILS OF BUS FACILITY

PLACE _____

ROAD NAME / STREET _____

STOPPAGE _____

BUS ROUTE NO. _____

SIGNATURE OF TRANSPORT OFFICER/IN-CHARGE

FOR OFFICE USE ONLY

FEES PAID AT THE TIME OF ADMISSION _____ DATE __/__/__

MODE OF PAYMENT _____

SIGNATURE OF ACCOUNTANT

SIGNATURE OF ADMISSION INCHARGE

PRINCIPAL SIGNATURE

Affix Coloured
Passport Size
Photograph Of
Mother

PARTICULARS OF PARENTS

Affix Coloured
Passport Size
Photograph Of
Father

MOTHER

FATHER

Name

Academic Qualifications

Occupation

Designation

Official Address

Cell no .

E-MAIL ID

Annual Income

Present Residential Address

Pin Code

LIST OF ENCLOSURES

- FOUR PASSPORT SIZE PHOTOGRAPHS OF STUDENTS , TWO PASSPORT SIZE PHOTOGRAPH OF PARENTS
- DATE OF BIRTH CERTIFICATE - PHOTOCOPY
- SCHOOL LEAVING CERTIFICATE FROM MIS PORTAL / TRANSFER CERTIFICATE
- MARKS SHEET /REPORT CARD OF PREVIOUS CLASS
- PHOTOCOPY OF AADHAAR CARD OF STUDENTS AND PARENTS
- FAMILY ID
- MIGRATION CERTIFICATE
- SC/BC//BPL CERTIFICATE (IF APPLICABLE)
- SPECIAL CASES CERTIFICATE