

# **LAKSHAY INTERNATIONAL SCHOOL**

## **NAULTHA**

**ADMISSION form**

**202\_ - 202\_**

NAME	<hr/>
CLASS	<hr/>
HOUSE	<hr/>
VILLAGE	<hr/>

# 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 1<sup>st</sup> 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 GURNTEE 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 SUBMITTITED
- ✓ 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 SIGNATURE 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**

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**Academic Qualifications**

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**Occupation**

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**Designation**

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**Official Address**

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**Cell no .**

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**E-MAIL ID**

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**Annual Income**

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**Present Residential Address**

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**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**