

Sch	No.		•••									••
(For	Off	ice	us	se	0	n	ly	/)				

Colour Photograph

APPLICATION FORM

lame of the Student	•
Class Applied For	,

APPLICATION FORM FOR ADMISSION OF BOARDERS/DAY BOARDERS/DAY SCHOLARS

Aryakulam International School

(An English Medium & Co-Educational)

Assandh Road, Near HP Petrol Pump, Munak (Karnal)
Phone: +91 94662-52192, 99967-22338
E-mail: aismunak@gmail.com | Website: www.aismunak.com

Name of the Student :								
Gender M/F :								
As Boarder/Day Boarder/D	Colour Photograph							
Date of Birth (In digits):								
Date of Birth (In words) :								
Place of Birth:								
Blood GP:								
Whether belong to Gen SC ST OBC EWS (att proof)								
Nationality:		Religi	ion:					
Permanent Home Address	a 4							
State:			Pin:					
Mobile No. :			Resi. Mobile No. :					
Email:								
Address for Correspondence :								
Father's Name :			Nationality:					
Education:			Occupation:					
Designation:			Office/Business Address :					
Mobile No. :								
Mother's Name :			Nationality :					
Education:			Occupation:					
Designation:			Office/Business Address :					
Mobile No. :								

Names of real Brother's & Sister's	Age	Class	School Attending
Name and address of Local Guardian (Bo	arders only)	•	
		Мо	bile No.:
Name, relation & address of two people	allowed to m	eet the child and	I take him/her out on holidays
Place from where Transport required (Day Boarde	rs/Day Scholars)	
Place from where Transport required (Day Boarde	rs/Day Scholars)	:
Place from where Transport required (Day Boarde	rs/Day Scholars)	:
Place from where Transport required (Any information regarding the child's hea		rs/Day Scholars)	:
		rs/Day Scholars)	:
Any information regarding the child's hea	lth :	rs/Day Scholars)	
	lth :	rs/Day Scholars)	
Any information regarding the child's hea	lth:		: n certificate (where applicable)
Any information regarding the child's hea To be submitted with this applic	lth:		
Any information regarding the child's hea To be submitted with this applic O1 Birth certificate original/co	lth:	04 Migratio	n certificate (where applicable)
Any information regarding the child's hea To be submitted with this applic	ation:	04 Migratio	
Any information regarding the child's hea To be submitted with this applic O1 Birth certificate original/co	ation:	04 Migratio	n certificate (where applicable)
Any information regarding the child's hea To be submitted with this applic O1 Birth certificate original/co	ation:	04 Migratio 05 Latest	n certificate (where applicable)

CERTIFICATE

I understand and agree/ will abide by ;-

- A. That registration of my son/daughter/ward does not guarantee admission into the school and that the Registration Fee is neither transferable nor refundable.
- B. That I have read and understood the rules and regulations of the school given in the prospectus including that of fee payment and withdrawal.
- C. That I shall not hold the school liable/responsible for any injury suffered by my son/daughter/ward in the course of participating in curricular/extra curricular activities and organized games of the school.
- D. That I am the certified bonafide guardian of the child. I understand that rendering false or misleading information or withholding correct information may disqualify the child from education at this school.
- E. That I shall pay all charges and fees by 10th of every month as per rules monthly.

Date		Parent's	Parent's signature				
	UNDE	RTAKING					
I understand and agree that i	in the event of my child/v	ward traveling	in the bus from residence to school back and $% \left(1\right) =\left(1\right) \left(1\right) \left$				
School to outside on education	onal and cultural tours and	excursions wi	thin the country, this shall be solely on my own				
risk and responsibility. I under	take that I shall not hold th	e school liable	e/responsible for any mishap/injury caused in the				
course of organized outings.							
Date		Parent's	signature				
	FOR OFFI	CE USE OI	NLY				
Admit to class	House						
Date		Principal's s	signature				
Details of payment on acco	ount of :						
A. Registration No :	Receipt No:	Dt.	Signature of Cashier :				
B. Admission No :	Receipt No :	Dt.	Signature of Cashier:				