



Col Satsangi's Kiran Memorial

NNNTS Pre - Primary

Admission Form

Paste recent
colour
photograph

N.B. - Please read carefully this form & fee schedule. Kindly seek admission of your ward only if you are genuinely convinced and not as a contingency due to your urgent need at the moment, to later feel or say that this is unfair and other schools do not do it etc. Please enclose the required documents alongwith the form. **I hereby apply for admission as per details given below:**

I. I AGREE to abide by **rules & regulations** framed/changed without any reference/concurrence to/by me & hereby give up all rights/claims now & in future, to challenge any of these in any way legal or otherwise, whatsoever.

I SEEK this admission after full knowledge & conviction of the excellent/unique setup of the institution including it's special characteristics of living style/educational process, which may be considered rather unusual by many and in the spirit of Raja Dashrath sending 'Ram' to Vishwamitra, Raja Pandu sending Pandavas to Dronacharya etc.

I WILL FULLY RESPECT the Customs & Philosophies of the Institution regarding festivals, holidays, leaves & dresses etc. and I know that I am doing it for the ultimate benefit, growth & development of the child & entirely at my cost & risk, with full faith in the best effort of the institution, & I FULLY UNDERSTAND that the Institution & its staff will in no way be considered responsible for any mishap/failures whatsoever including God forbid physical harm to the child due to any act of commission/omission of the Institution or its staff.

Date :.....
Signature of Parent/Guardian

This form is to be filled by parent. The form will be then verified by main office.

Fill in the form clearly in BLOCK LETTERS with correct information.

You can select more than one option wherever required. If address/phone no. is same don't write it again at other places. The form should be duly signed by the parent/guardian.

I apply for the Admission of my ward in Classas: BOARDER Long Hours Day Boarding

II. STUDENT'S PERSONAL INFORMATION			
	First Name	Middle Name	Last/Surname
Student's name			
Date of birth/...../.....(Date/Month/Year)		Age: Years Months
Place of Birth	City..... State..... Country.....		
Gender	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		
Mother Tongue	<input type="checkbox"/> Hindi <input type="checkbox"/> English <input type="checkbox"/> Other.....		
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Other.....		
If child is adopted	<input type="checkbox"/> Yes (Since year) Attach Adoption Deed		
No. of Brothers	No. of Sisters.....	Student's Position in Family (Elderliness).....	

III. ADDRESS		
	Present Address	Permanent Address (if different from present)
House No.		
Locality		
City		
State		
Country		
Pin code		
Give Contact No with STD code+ Telephone No		
Telephone No.		
Parent's Mobile No		

IV. ADDITIONAL INFORMATION	
Average annual Income of the Family	Rs. _____
Persons Responsible for Paying Fees	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Brother <input type="checkbox"/> Other.....
Special interest (if any)	

ANY OTHER USEFUL INFORMATION:

.....

V. FOR OFFICE USE ONLY			
School No.....	Class.....	Section.....	House.....
As <input type="checkbox"/> BOARDER	<input type="checkbox"/> LONG HOUR DAY BOARDER	OFFICIAL SIGN.	
VI. ADMISSION DETAIL: To be verified by main office/admission office			
Admitted in Class		Admission Date	

Seat Reservation Fee	RS. PAID VIDE MR NO..... DTD.....	OFFICIAL SIGN.
Fee paid after approval of Admission	RS. PAID VIDE MR NO..... DTD.....	OFFICIAL SIGN.

VII. TRANSPORTATION: Student's Transportation Information (to be given by School Transport)			
Allotted Pickup point.....	Pickup Time.....	Drop Time.....	
Allotted Drop point.....	Route No	Bus No.....	OFFICIAL SIGN.
HOSTEL: Student's Hostel Information (to be verified by Hostel warden)			
House Allotted.....	Hostel Allotted.....	Room No. Allotted.....	
Mess <input type="checkbox"/> Veg <input type="checkbox"/> Non Veg	Attached with Student as friend	OFFICIAL SIGN.	

PRINCIPAL'S APPROVAL & REMARKS

Signature of Principal

Date

I accept admission as per paras V, VI and VII

Signature of Parent/Guardian:

DATE :

PLACE: NAME OF THE SIGNATORY:..... RELATIONSHIP WITH THE CHILD:

VIII. DOCUMENTS						
Birth Certificate	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> In Process	<input type="checkbox"/> O	<input type="checkbox"/> PV	<input type="checkbox"/> PS
Medical Fitness Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Certificate.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adoption Deed (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I certify that the above documents are true

Parent's Signature

Date

Sign. of Office Supdt.

IX. FAMILY INFORMATION (Persons authorized to meet/ take child home)			
	Father	Mother	Local Guardian (if any)
First Name			
Middle Name			
Surname			
Age			
Academic Qualification			
Occupation			
Organization Name			
Designation			
Income (Per Annum)			
email id			
Contact Address (Office)			
City			
State			
Country			
Pin/ Zip Code			
Telephone(Office)			
Mobile (Additional)			
Specimen Signature			
Please sign across the photograph also	Paste Photograph	Paste Photograph	Paste Photograph

Marital Status of parents Married Divorced Separated Widowed

SIBLINGS: Brothers/ Sisters / Cousin name and their Academic / Professional Information			
Relation Type	1. <input type="checkbox"/> Bro <input type="checkbox"/> Sis <input type="checkbox"/> Cousin	2. <input type="checkbox"/> Bro <input type="checkbox"/> Sis <input type="checkbox"/> Cousin	3. <input type="checkbox"/> Bro <input type="checkbox"/> Sis <input type="checkbox"/> Cousin
Full Name			

If studying in this school

School No.			
Class + Section			

If studying in other school

School Name			
Address			
Class			

X. PHYSICAL INFORMATION: To be verified by Medical Incharge of the School		
Height (in Cm).....	Weight (in Kg).....	Left Eye Sight..... Right Eye Sight.....
Skin Complexion/Color		<input type="checkbox"/> Fair <input type="checkbox"/> Wheatish <input type="checkbox"/> Dark <input type="checkbox"/> Other.....
Blood Group		<input type="checkbox"/> A+ <input type="checkbox"/> A- <input type="checkbox"/> B+ <input type="checkbox"/> B- <input type="checkbox"/> O+ <input type="checkbox"/> O- <input type="checkbox"/> AB+ <input type="checkbox"/> AB-
Mark of Identification on Body		
Any Physical Disability/Challenged		
Allergies (if any)		
Drugs prohibited for above Allergies		

XI. I specifically state that

- I as Local Guardian – do affirm, to be available to the School, as nearest contact, to represent the parents, in case of need and do the needful in the benefit of the child.
- We know that the above information is confidential and will be used only for the benefit of the child, who is admitted to the school entirely on our request and at our risk and that the school will not be held responsible for any mishap whatsoever, if it may unfortunately occur.

(Sign. of Parents/Guardian)	(Sign. of Local Guardian)	(Sign. verify by Parents/ Guardian)
----- Name	----- Name	----- Name

ANY OTHER USEFUL INFORMATION:

XII. I AGREE TO ABIDE BY THE FOLLOWING RULES REGARDING PAYMENT OF FEES & WITHDRAWAL FROM SCHOOL:

- I have gone through the fee schedule and other rules as contained therein and also in the school prospectus & shall comply with them.
- I will pay all the dues by 9th of the month.
- All fees are chargeable on FULL SESSION BASIS irrespective of the date of admission. However as a concession to Transfer cases for MID-SESSION ADMISSION only 3 months fees may be charged as arrears fee on the date of admission.
- Late Grace Fee of Rs. 100/- per month for boarder and Rs. 50/- for day boarder for any type of dues will be charged after 9th of the month.
- Existing rate of fees is linked with CONSUMER'S PRICE INDEX and DA as announced from time to time by the Govt. of India. The announcement by the Govt. will be considered as NOTICE to parents and fees will be required to be paid as calculated, ipsofacto & automatically, according to the Govt. announcements.
- If child is to be **withdrawn from school, two clear month's advance notice** is a must in all cases, otherwise two months fees will be charged in lieu.
- In case, after applying for withdrawal, I want my child to continue, it will be treated as re-admission case.**

Verification and undertaking: I verify that information supplied in this application form is correct and I will provide full support to my ward in fulfilling the requirements of CSKM PS and meeting all expenses.

Signature of Parent/Guardian:

DATE :

PLACE: NAME OF THE SIGNATORY: RELATIONSHIP WITH THE CHILD: