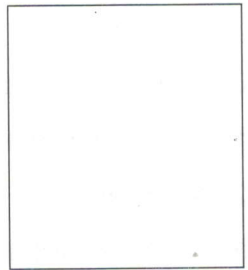


ADMISSION FORM



Session

Class:
(To Which Admission Sought)

Cambridge International School

Kariha, Banga-Nawanshahr Road, S.B.S. NAGAR (Pb)-144508
Ph. : 8283820855, 82880-71396 E-mail: cism2013@gmail.com

Admn No.....
(To be filled by office)

Date of Application _____ Reg. No _____ Date of Adm _____

Student Name (IN BLOCK LETTERS) _____ Gender M [] F []

Date of Birth: (in figure) _____ (in words) _____

Nationality: _____ Religion _____

Category: SC [] BC [] ST [] OBC [] GEN [] Adhaar No. _____

Father's Name _____ Quali _____ Occupation _____

Mother's Name _____ Quali _____ Occupation _____

Mother's Contact _____ Father's Contact _____

Email Address: _____

Residential Address: _____

Permanent Address: _____

Emergency Contact Person Name: _____ Contact No. _____

Previous School Detail:

Name and Address of the School	Class Studied & Board	Reason for Leaving
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Brother/sister if studying in the Same Branch of Cambridge School:

Name _____ Class _____

Transport Facility Required: Yes/No _____ Any Land Mark _____

CONDITION:

School transport fee is fixed. One way travel facility may be considered but on full fee. Transport facility are available only from designated bus stops if there is space available in a particular route. Parents wishing to withdraw their children from school transport arrangement must fill in a discontinuation form a month in advance.

MEDICAL HISTORY

Please Specify Health Information. If Any _____ Blood Group _____

DECLARATION

Whether the candidate is

(1) Single Girl Child: YES NO (2) Specially abled (Divyangjan); YES NO

(Attach proof wherever applicable)

I hereby declare that the above information including Name of the Candidate, Father's/ Guardian's Name, Mother's name and Date of Birth furnished by me is correct to the best of my knowledge & belief. I shall abide by the rules of the School.

REMARKS/ ORDER OF DIRECTOR/PRINCIPAL

SIGNATURE OF PRINCIPAL

SIGNATURE OF PARENTS / GUARDIANS

Documents/Certificates Required (Mandatory)

- | | | |
|--|------------------------------|-----------------------------|
| 1. Birth Certificate | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Aadhaar card | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Aadhaar card of Father | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Aadhaar card of Mother | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. Transfer certificate | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 6. Marksheet of previous class Result | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 7. Permanent Education Number from previous school | _____ | |
| 8. UDISE code of Previous School | _____ | |

NOTE

1. In case, student is from other board, Transfer Certificate should be countersigned by the Competent Authority.
2. I shall ensure that the school fees are paid in time.
3. School can amend any policy when required.
4. If My Child Remain Absent for more then 1 Month, the School has the right to struck of his/her name.

Date : _____

Signature Of Parents / Guardians