## THE ELITE SCHOOL & JUNIOR COLLEGE Form Serial No. ELITE **ADMISSION APPLICATION FORM FILL IN CAPITAL LETTERS ONLY** Student's Photo **Application Date** Class Applied Academic Yr. MMYYYY **BASIC INFORMATION OF STUDENT** Last Name / Surname First Name Father's / Middle Name Gender Date of Birth Date of Birth in Words YYYY Place of Birth Nationality Birth Mark ☐ Indian ☐ NRI ☐ Foreigner Religion Caste Category Open SC ST OBC VJ NT Others **Blood Group** Mother Toungue Adhaar Number Correspondence Address Permanent Address District: Pin: District: Pin: Contact Number Emergency Contact no. **Email ID** Mobile for School SMS Distance from School Preferred Mode of Travel Walking School Bus Own Vehicle Public Transport Father's Signature Mother's Signature Father's Photo Mother's Photo Guardian's Photo Guardian's Signature

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Father/Guardian Full	Name	
Date of Birth	Educational Qualification	
DD MM YYYY		
Occupation	Organization	Designation
Work Address		
Mobile No.	Email ID	Annual Income
Mother/Guardian Ful	I Name	
Date of Birth	Educational Qualification	
Date of Birth  DD MM YYYY	caucational Qualification	
	Organization	Destaurustus
Occupation	Organization	Designation
Work Address		
Work Address		
	F 11D	
Mobile No.	Email ID	Annual Income
If Single Parent; Child	with: Aother Father Reason:	
Details of Siblings (Bro	athors (Sistars)	
Vame	Age Std. (if studying) School Name	Relation
	tails (If applicable)	
Previous Schoolina De		
Previous Schooling De Year Std./0		Board Grade
		Board Grade

Sirth Details:   Normal   Caesarian   Spl. Attention   Special care after birth:   Yes   No   NICU   Any Other   Hearing - Any difficulty observed :   No   Yes; Details (If yes)   Vision - Use of Spectacles/Lenses:   No   Power   Special Care (if any)   Special Care (	MEDICAL HISTORY
Special care after birth:	Height: cms / feet in. Weight kgs
Hearing - Any difficulty observed:	Birth Details:   Normal Caesarian Spl. Attention
Disability if any:   Special Care (if any)   Special	Special care after birth:
Any medication for any health conditions:  Any medication for general well being:  Any Allergy / any medical information that school should be aware of:  DOCUMENTS ATTACHED: Self Attested Photocopy along with originals for verification)  Birth Certificate  Adhaar Card  Blood Group Report  Medical Fitness Certificate  Adhaar Card of Father & Mother / Guardian  Passport Size Photographs of Student (4 copies)  Passport Size photographs of Parents (2 copies)  Caste Certificate (if applicable)  Leaving / Transfer certificate Original (Class 2 or above)  Mark sheet of previous school/class (if any)  Transportation Form (if opting for)  How did you get to know about this school?  Staff   Pamphlet   Email   Facebook   Newspaper   Magazine   Banner/Poster   Other Medium   Referred by:	Hearing - Any difficulty observed : No Yes; Details (If yes)
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☐ Staff ☐ Pamphlet ☐ Email ☐ Facebook ☐ Newspaper ☐ Magazine ☐ Banner/Poster ☐ Other Medium ☐ Referred by:	
☐ Other Medium ☐ Referred by:	
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## DECLARATION

- 1. We, hereby, certify that the information provided in this admission form is correct to the best of our knowledge and belief.
- 2. The school reserves the right to cancel the admission of any student if it is found that the declaration / certificates submitted at the time of admission are found to be false/improper.
- 3. We, on behalf of our ward, hereby, undertake to abide by all the notifications/instructions/circulars issued by the head/office/management of the school from time to time.
- 4. All disputes are subject to the jurisdiction of Pune Courts only.

We put our signatures to confirm the above declaration

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- 5. We are well aware of fees details, penalty and cancellation policy of the school and hereby undertake to adhere the same.
- 6. We hereby undertake that we will adhere to the policies and decisions taken by the management and will abide them. We have read the terms and conditions and rules and regulations of the school. We hereby undertake to adhere by it.

DD MM YYY	(Y		
Date & Place	Signature of Father/Guardian Signature of Mother		
FOR OFFICE USE ONLY			
Student Name:			
Class/Section:	Academic Session:		
Document Status:			
Mode of Payment	CASH CHEQUE ONLINE Amount (₹):		
Payment Reference Remarks (if Any)	Chq/Trans no.  Bank		
Verified By:			
Admission Status:	ADMITTED REJECTED CANCELLED Principal / Headmaster		

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