SRI RAMA VIDYALAYA

Affiliated CBSE ., New Delhi 103/2, Jakkur Layout, Bangalore- 64. Ph:23637720 / 23636417 APPLICATION FOR ADMISSION

PRIMARY	SECONDARY	
ADMISSION NUMBER	_	

	ADMISSION NUMBER		
Apllic	ation No.		Reg.No.
1. 2.	Name of the Pupil (in Capitals) Date of Birth	:	
	(i) In figures	:	
	(ii) In words	:	
3.	Sex	:	
4.	Name of Mother	•	
	Qualification	:	
	Occupation	:	
5.	Name of Father	:	
	Qualification	•	
	Occupation	:	
	a) Residential address	•	
	& Phone No.	:	
	b) Office address	:	
	& Phone No.	:	
	c) Annual Income	:	
6.	Name and address of local guardian	:	
7.	(a) Nationality	:	
	(b) Religion	:	
	(c) Caste & Group	:	
8.	Name of the school latest attended	:	
9.	Class in which the Pupil were studying	:	
10	. Whether the transfer certificate is produced	:	
11	. Transfer certificate No. With Date	:	

12. Language studied	1 st Language	•	
	2 nd Language	:	
	3 rd Language	:	
13. Mother Tongue		:	
14. No. Of brothers:	No. Of Sisters:		Dependents:
15. Second & Third La	nguage the child opts to Study	y	
2 nd I	Language	:	
3 rd L	anguage	:	
16. Identification mark	s (if any)	:	
17. Blood Group		:	
18. Class to which the	admission is sought	:	
	nt has any other brother/ sister this school. If so state	r	
name and class in which he / she is studying		:	

Note: Any change of address should be immediately notified to the school authorities. Application for admission or any letter or form should be signed by the parents of pupil or by the person authorized to sign on behalf of parents, under an affidavit by him/ her or to do so.

Signature of the Parents / Guardian

I certify that the information given is correct. If my ward is admitted, I shall be fully responsible for the regular payment of all kinds of fees and other dues of my ward as per the rules laid by the Authority from time to time.

Further, I hereby, agree to accept any changes in the condition of admission made by the school from time to time without giving prior notice. I agree that the school reserves the right to change at any time the structure of fees or any rules and regulations concerning the school without giving any notice to me. I accept that these changes will be binding on my ward and me.

Date:	Signature of the Parents/ Guardian
	Name:

Note: Please enclose the following with this application form at the time of submission. (Incomplete application form will not be entertained).

Enclosures: 1. Original Date of Birth Certificate

- 2. Transfer certificate (from class I to Class X)(T.C should be countersigned by the B.E.O. or by the CBSE Regional officer.)
- 3. Xerox copy of Memorandum of Marks from previous school.
- 4. Two passport size and one stamp size photographs.
- 5. Caste certificate (If possible)
- 6. Application for Transport facility, (If required)