



Vydehi School of Excellence

82, EPIP Area, Vydehi Campus, Whitefield, Bangalore - 560 066.

e-mail: info@vydehischool.com

URL: www.vydehischool.com

APPLICATION FORM

Form. No _____

Affix photo of Father

Affix photo of Mother

Affix photo of Child

Admission required for:

Grade - I

Grade - II

Grade - III

Grade - IV

Grade - V

Note : Please use capital letter only.

We, _____ and, _____ wish to admit our son/daughter/ward whose particulars are given below as a day scholar at the Vydehi School of Excellence.

A. INFORMATION OF THE CHILD

Last Name

First Name

Gender

Male Female

Date of Birth

DD MM YY

Date of Birth in words

Blood Group

Religion

Nationality

SC/ST

Yes No

Languages known

PERMANENT ADDRESS

Tel.:
Fax.:

CORRESPONDENCE ADDRESS

Tel.:
Fax.:

Distance from school (in kms):

Preferred Phone Number for school SMS:

Emergency Contact No. (Res/Mobile)	Name of the person to be contacted	Relationship

FAMILY INFORMATION

Father/Guardian:

Name:	Age:	
Educational Qualification:	Institution:	Nationality:
Occupation:	Office Address:	
Designation:		
Annual Income:	Tel:	

Mother/Guardian:

Name:	Age:	Nationality:
Educational Qualification:	Institution:	
Occupation:	Office Address:	
Designation:		
Annual Income:	Tel:	

Single Parent:

Tick one, only if applicable

Father	Mother
if child is sponsored (Name of sponsoring agency)	
Permanent Address:	

Details of Brothers / Sisters of the student

Name	Age	Name of the Institution	Standard
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Does the student have any major ailment(s), including any allergy that the school should be aware of?

Incase of staff ward:

Name of the parent:

B. DETAILS OF PREVIOUS STUDY

Year	School	Standard/Grade	Grade/Marks obtained in final exams
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

The previous school affiliated to:

SSLC

CBSE

ICSE

OTHER

Awards won so far in sports, arts or academics

C. ENCLOSURES (without which this application will not be accepted)

- Medical Form
- Birth Certificate
- Transfer Certificate (if applicable)
- Admission Fees
- Copies of progress report cards for the last 3 years (if applicable)
- Tahsildar's Certificate : for Scheduled Castes, Scheduled Tribes or Backward Communities

The above documents photocopies (duly attested) must be produced along with the following completed application form:

- Transportation Form

Please note: Staple all documents to the top left-hand corner of the application

D. MISCELLANEOUS

How did you hear about the Vydehi School of Excellence?

Name of news paper	Website	Name of the Magazine	Others (please specify)/ hoardings/pamphlets/ word of mouth/ catalogue
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

DECLARATION

I, _____ have the authority to admit my child /ward _____, into the school as the parent/ legal guardian. I undertake the responsibility of providing any evidence needed to support the information provided here, if necessary for any reason. I declare that the statements provided in this application are correct to my knowledge and if found otherwise, I shall abide by the decision of the management. I agree to abide by the rules, regulations and the fee structure of the school.

Date:

Signature of parent / guardian

For Vydehi School of Excellence Office use only

Admission co-ordinator

Head of the Institution

Date _____

Date _____