



## 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     Grade - VI     Grade - VII     Grade - VIII

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

  

Date of Birth in words

Blood Group

Religion

Nationality

SC/ST

Yes     No

Languages known

#### RESIDENTIAL ADDRESS

Tel.:
Fax:
E-mail:

#### 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:	Nationality:
Educational Qualification:	Institution:	
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 completed application form:

- Transportation Form

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

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**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

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**For Vydehi School of Excellence Office use only**

\_\_\_\_\_  
Admission Co-ordinator

\_\_\_\_\_  
Head of the Institution

Date \_\_\_\_\_

Date \_\_\_\_\_