



Sr. No. .....

## SWAMI OMKARANANDA MONTESSORI SCHOOL

Gali No.10 Amit Gram (Dudhupani) Gumaniwala, Near Rishikesh(U.K.)

(Recognized)

Passport Size Photo affixed scholar

## **APPLICATION FOR ADMISSION**

Joined Passport photo of Parents Affixed

(Application form must be filled by the parents or guardian of the students)

1.	Name of the Scholar (Block letter)	:			•				
			Male □	Fe	male 🗆				
2.	Date of Application	:							
3.	Class in which admission is desired	:							
4.	Scholar's date of birth	:							
5.	Parents/Guardian's name	•							
6.	Address for correspondence	•	Present:						
		:	Permanent:						
7.	Religion	:							
8.	Caste (Tick Mark )	:	SC □ ST	☐ OBC ☐ Gen ☐	☐ Minority ☐				
	(Certificate of competent authority is required in case of SC/ST/OBC/Min. Castes)								
9.	Nationality (Tick )	:	Scholar	Indian/N.R.I					
		:	Father	Indian/N.R.I					
		:	Mother	Indian/N.R.I					
10.	Sibling, if any, in the school	:	Yes/No (If yes, mention name, class and relation)						
			Name		class				
			Relation	Bro	ther/Sister				
11.	Parents/Guardian's qualification	:	Father	Mother					
	Guardian								

12.	. Father's occupation with details		Salaried/Businessman/N.R.I.									
			Office	/Busines	s Or	ganiz	ation	addres	ss			
			•									
				•								
			Annua	I Gross	incor	ne						
13.	Mother's occupation with details	:	Worki	ng 🗆			Hous	ewife				
14.	Mention complete details in case of	:										
	dependency of scholar or any other person	:										
15.	accept parents Birth mark of scholar, if any	:										
	Hobbies of the scholar	:										
17.	Details of languages known by scholar	:	Hindi		En	glish		Oth	er 🗆			
18.	Has the child every been suffered from any	:										
19.	Educational details for last two years	:		ol name	& its	yea	r cla	ass	mark		%age	_
				location					obtain	ou		
20	Scholar's participation in school so surricular											
20.	Scholar's participation in school co-curricular	•										
	We here by solemnly confirm that the information a	and facts	given i	n the ap	plica	tion a	are co	mplete	ely true a	and a	accurate	to
	the best of my knowledge and belief. We undertake responsibility and are agree to abide with the rules and regulations										ns	
	of the institution. If, in case, any misrepresentation, omission, concealing of facts are found at a later stage, the same will											
	justify the denial of admission/cancellation or expuls	sion of m	y ward	from the	scho	ool wi	thout	any no	otice.			
	Signature of Mother/Guardian with full name				Sign	ature	of Fa	ther/G	uardian	with	full nam	е
	Parents/Guardian are also hereby informed that alth	nouah sc	hool alv	vavs tak	es no	ormal	preca	autions	but it do	oes r	not take	
	Parents/Guardian are also hereby informed that although school always takes normal precautions but it does not take responsibility either wholly or partially for any mishap, accident, injury minor or major, if occur during the tenure of your											
	ward in the school or while traveling for TO and From between your residence and school, during excursions, camps,											
	educational tours etc. Parents will be held fully responsible for any untoward incidents and they will not lodge any											
	complaint in this regard.											
	Signature of Mother/Guardian with full name			Signa	ture o	of Fat	her/G	uardia	n with fu	ıll na	me	
		R OFFIC										
	Admitted in class		ID No	D								
	Date of admission		Chec	ked by :								
	Manager	Admini	strator						Prin	ncipa	I	