

Form no

Affix recent passport size colour photo of

the Student

## **Application Form For Admission**

	(То	be filled by Parer	it / Guardian of ch	nild)	
<ul><li>Admission No</li><li>Admission into class</li></ul>	:				
<ul><li>Admission into class</li><li>Academic year</li></ul>	: 20 20				
Aadhar No	:			Date	:
Master / Miss :					
Fi	rst Name	Midd	e Name	Last Name	9
Seeking Admission for year 20	01 <b>IK-1</b>	IK-2	IK-3	Grade I	Grade II
	Grade III	Grade IV	Grade V	Grade VI	Grade VII
	Grade VIII	Grade IX	Grade X		
Date of Birth :	in words :			Blood Group :	
Current Residential Address:					
			Citv :		
Pin : Tel :			,		
Mother Tongue :	Caste :	(SC/ST/BC (A	ABCD)/ OC) ( <b>Please</b> a	attach the supporti	ng documents)
Name of Previous school :		E	Board : SSC ICSE	CBSE IB	Cambridge
Identification Marks : A)					
В)					A 555
a. II Language ( Grade I to X )	- choose Hindi / Telugu	:			Affix recent passport size colour photo of
b. III language ( Grade V to VI	II only ) Hindi / Telugu /	French / Sanskrit :			
c. SPA ( Grade VI to X only )					
To choose one from Sports a	and one from Performin	g Arts (SPA) (Refer Pa	ge - 3) :		
Sports :	Perf	orming Arts :			
Family Information					A 555:
Father's Name (with surname	<u> </u>				Affix recent passport size
Occupation :Q					colour photo of
Name of Organisation / Empl					
Off. Telephone :					
Mother's Name (with surnam					
Occupation :Q					
Name of Organisation / Empl					
Off. Telephone :					
Name of Guardian (if app					
Relation to child :		Occupa	ation of Guardian	:	
Qualification :		Designa	ation :		
Name of Organisation / Er	mployer :		Address (Busir	ness / Office) ;	
Off. Telephone :	Mobile No	:	E-mail :		

Parent Please Note: Implementation of SPA activities offered will be subjected to a minimum required number of children opting for a particular activity in a class.

I agree to that my ward will participate in routine Physical Education, Games, Short break and Lunch schedule as laid down by OVIS.

**IV Transport Policy and Registration** 

Code of Admission :		Cl	nild Name :			Date:
Grade :						
1. I Require		/ Do not Require		$\neg$	/ Pending	
2. I understand and agr	ee the school ru	les & regulations to	oe followed for avai	— ling the s	school transpo	ort for my child.
3. Boarding will be from	n common point	ts given by the schoo	ol authorities for tha	at route.		
4. The child will board t	he bus one hour	r or one and half hou	ır before school tim	ne and w	ill be dropped	d within one hour or one
and half hour ( approx	kimately ) after s	chool time.				
5. If there is a shift of re	sidence in mid c	of the academic year	school manageme	ent has th	ne right to der	ny transport if the
location does not fall	under our defau	ult route.				
6. Transport facility can	be availed post	10 (or) 15 working d	ays of your ADMISS	ION.		
7. Transport fee paid is 1	neither refundab	ole nor adjusted und	er any circumstanc	es.		
8. I have read and agree	ed the route & th	ne bus stop provided	by the school.			
9. Only after confirmation	on by the school	management of ava	ailability of route ar	nd requisi	ition by the pa	arent, the transport
facility will be provide	ed.					
10 Last date of Registra	tion for the acac	demic year 20 2	O is	20		
11 Transport fee shall re	main same for e	either one way or tw	o way of transport.			
Route No			Address			
Rodie No			Address	• •••••		
Bus Stop	:					
One Way	:					
-						
Two Way	:		Ph :			
Transport In Charge	:		. Signature of t	:he Fathe	r :	
Signature of the Mothe	·		Sianature of t	:he Guarc	dian :	
			3			
Any special learning ne	eds ( Dlease stat	te in detail as this ir	oformation will help	n us in as	sistina vour c	hild )
Any special learning he	eds (Flease stat	te in detail do tillo il	normation will help	<i>y</i> 43 111 43	sisting your c	ring.,

Family Information (Continued)			
Are parents living together	YES NO, Who has	custody of the child?	Father Mother
Is the child adopted? YES N	10		
Sibling Information :			
My Son / Daughter is Currently enro			
	ivision :	Enrolment	No :
Terms and Conditions:	ATION		
PARENT / GUARDIAN DECLAR		//C   - - - - - - - - - - - - - - -	
I agree to my child's photograph ar The undersigned certifies that the f	following are Acceptable	·	cations.
1. The fees charged are not Refund			
2. The decision of the management			
<ol><li>Management has the right to im circumstances.</li></ol>	plement changes to the	fees and Curriculum	from time to time as <b>per the</b>
4. Management has the right to ret	ain the <b>W</b> ork books/Activ	vity Books/ Any Materi	al used by the students in <b>the</b> class.
II) HEALTH INFORMATION			
EMERGENCY HEALTH RECORD (TO	) BE FILLED BY PARENT	)	
Student's Name:		Sex : Male/Fe	emaleGrade/Division:
Father's Name :		Mobile No :	
Mother's Name :		Mobile No :	
Guardian's Name :		Mobile No :	
		Residence Telephor	ne :
In Case of emergency : If Parent or	Guardian is not immedia		
Family Physician's Name :			
		-	ble physician to examine my child (Withou
such permission the school assume	s no responsibility for en	nergency medicai atto	ention).
	YES	NO L	
possible safety measures to prevent	t any accident or mishap.	. I agree not to hold C	chool and ensures that it shall comply IVIS responsible for any possible illness Ily read and therefore understand the
		Signatu	re of the Parent :
III CDODTC AND DEDEODMING AD	EC INFORMATION FORM	/ TO DE EULED DV D	ADENT)
	ed as a part of the schoo	l curriculum. These ac	ctivities will be conducted during the scho- ne list given below, students can choose.
GRADE I - V	GRADE VI	- X	GRADE IV - X
All Activities	Choose one from Spor	rts	Choose one from Performing Arts
<ul><li>★ Karate</li><li>★ Skating</li></ul>	Cricket	Foot Ball	Karate Skating
◆ Key-Board			_
◆ Guitar     ◆ Physical Education	Swimming	Darket Dall	Key-Board Guitar
◆ Western Dance	Swimming	Basket Ball	

♦ Swimming

	S.No.	Document Name	Yes	No	NA	Remarks	
	1.	8 Passport size photographs					
ſ	2.	Passport size photo of the Mother					
a		and the Father (One each)					
ļ		per application					
	3.	Photocopy of Aadhaar Card					
ļ	4.	Birth Certificate (Colour Xerox)					
	5.	Transfer Certificate in original from previous school					
	6.	Caste Certificate (Colour Xerox) if applicable					
ľ	7.	Study cum Conduct certificate					
ľ	8.	Copy of Passport and					
		Visa (in case of foreign students)					
Ī	8.	Attested photocopy of the					
		Report Card of Previous School.					
		Father :	Signature	of the Moth	er :		
FOR THE	ADMIN	ISTRATOR'S USE	FOR A	CCOUNTAN	T'S USE ONLY	(	
Date of S	ubmissi	on :	Da	te of fee Re	eceipt :		
Admissio	n for	:	Fe	e Receipt N	0 :		
Time/Bat	me/Batch Perference :		Date and signature of Accountant :				
Checked and processed by : Da			te and sign	ature of Adm	inistrator :		
Counter	checked	by :	<b></b>				
		ACCEPTANCE OF APPLICATI	ON AND ADI	MISSION			
Signa	iture of I	Principal				Date	
		CTUDENT DECLARATION (ADDUC	ADI E EOD C	ACCES VII A	50 V)		
		STUDENT DECLARATION ( APPLIC	ABLE FOR C	LASSES VI I			
I have	e studiec	l upto class					
TC No	o. No	Date :	is l	nere with er	nclosed.		
		abide by the rules and regualations of the scho			•		
politio	cal, non-	academic movements what so ever in case of	default, my r	name may b	e struck off fr	om the rolls.	
Date:				Pla	ace:		

Signature of the Student

Checklist of documents to be submitted along with the Application for Admission Tick

as applicable

Signature of the Parent/Guardian