

AMITY INTERNATIONAL SCHOOL, NOIDA

ADMISSION FORM

[Write in Capital Letters]

Form No. _____

Admission No. _____

Please affix a recent
colour photograph
of the child

We, _____ and _____, desire
to have our son / daughter / ward whose particulars are given below admitted as a day scholar in your School:

INFORMATION ON CHILD

Last Name

First Name

Date of Birth

Date of Birth in Words

Religion

Class for which Admission is sought

Nationality

SC/ST

YES

NO

RESIDENTIAL ADDRESS

| |
|-------|
| |
| |
| |
| |
| Tel.: |
| Fax: |

CORRESPONDENCE ADDRESS

| |
|-------|
| |
| |
| |
| |
| Tel.: |
| Fax: |

Emergency Contact Telephone Numbers :

FAMILY INFORMATION

Father/Guardian :

| | | |
|-----------------------------|------------------|---------------|
| Name : | Age : | Nationality : |
| Educational Qualification : | Institution : | |
| Organisation Working for : | Office Address : | |
| Designation : | | |
| Annual Income : | Tel.: | |

Mother/Guardian :

| | | |
|-----------------------------|------------------|---------------|
| Name : | Age : | Nationality : |
| Educational Qualification : | Institution : | |
| Organisation Working for : | Office Address : | |
| Designation : | | |
| Annual Income : | Tel.: | |

SCHOOL:

Previous School Attended, if any: _____ (recognised/not recognised)
We herewith submit the School Transfer Certificate in Original. For class V & above the TC has been counter signed by the concerned State Education Authority.

PROOF OF AGE :

We solemnly declare that the date of birth of the child given above is as per the Birth Certificate which is produced for verification. A certified copy is also enclosed.

IMPORTANT :

Transfer Certificate for Class I & above. The Transfer Certificate for Class V & Above must be counter signed by DEO.

SIGNATURES :

I hereby certify that the information given in the Registration Form is complete and accurate. I understand and agree that misrepresentation or omission of facts will justify the denial of admission, the cancellation of admission, or expulsion. I have read and do hereby consent to the Terms and Conditions being enclosed with the Registration Form.

Signature of Father/Guardian

Signature of Mother/Guardian

Date : _____ Date : _____

FOR SCHOOL USE ONLY

| | |
|---|---------------------------------|
| Check-List : | Information on Student |
| <input type="checkbox"/> Medical Form | Class : |
| <input type="checkbox"/> Birth/Transfer Certificate | Section : |
| <input type="checkbox"/> Transportation Form | House Allotted : |
| <input type="checkbox"/> PTA Form | Head of the Institution : _____ |
| <input type="checkbox"/> Admission Fees | Date : _____ |
| Bursar : _____ | |
| Date : _____ | |