

APPLICATION FORM

Academic Year 2013-14



LITTLE KINGDOM SCHOOL

(Affiliated to Central Board Of Secondary
Education, New Delhi)
Affiliation No. 1930227

Affix colour passport
size photograph
here

Class to which admission is sort

Application No

APPLICATION FOR ADMISSION [PLAY SCHOOL, LKG, UKG]

Note: Please wherever applicable

1.(a) Full Name of the Student :
(in Caps. As per in Birth Certificate) (b)

Sex : Male Female

2. Date of Birth

3. Mother Tongue

Languages : Spoken at home..... Second Language.....

4. Blood Group : Allergic to

5. SC/ST/BC/MBC/FC : Details 6. :

School Transport required : 7. : Yes No

Language Preferences:-

Second Language : Hindi Tamil

Third Language : Hindi Tamil Sanskrit

8. Name of Father :

Educational Qualification, Occupation, Organisation & Office Address:.....

Mobile No* email id.....

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9. Name of Mother :
Educational Qualification, Occupation, Organisation & Office Address:.....
.....
Mobile No..... email id.....

10. Residential Address :.....
.....
.....

11. Details of previous study :.....
(a) Name & Address of the school/ Play School in which the student last studied.....

12. STANDARD SEEKING IN AT PRESENT :
Medium of Instruction :
Whether qualified for promotion :
Is the previous school affiliated to : State Government CBSE ICSE

13. Standard into which admission is sought :

14. Languages the student had previously learnt:
(a) Second Language studied from standard.....
(b) Third Language studied from standard.....

15. Awards won so far in Scholastic(Academic) and Co-Scholastic(Sports, Arts etc)

16. Details of Siblings studying in our School:

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DECLARATION BY THE PARENT(S)

- A. I/We hereby declare that the date of birth in respect of my/our son/daughter furnished by me/us in Item No.2 is correct and that I/We will not demand any change in it at a later date.
- B. I/We have enclosed attested photocopies of the following certificates.
Birth Certificate Community Certificate Grade Sheets
- C. Fitness report (medical) indicating medical conditions (if any) and blood group.
- D. Transfer certificate from the school last attended.
- E. I / We have read the note above and will abide by the same.
- F. I / We shall abide by the rules and regulations of the school, in force from time to time.

I / We hereby declare that the information given in this application is complete and accurate.

Signature: Father/Mother/ Guardian

(Full Name :) Date

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FOR THE SCHOOL USE ONLY

Name			Admitted to Class.....		
Admission No.....		Date of Admission.....		Receipt No.....	
Name entered in the Admission Register: Book No.....			Page No.....		
Transfer Certificate <input type="checkbox"/>			Birth Certificate <input type="checkbox"/>		Blood Group <input type="checkbox"/>
			Community Certificate <input type="checkbox"/>		
Office In-Charge		Co-ordinator		Principal	