

# APPLICATION FORM

Academic Year 2013-2014



## 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 [ STD ]

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

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.....

11. Details of previous study : .....

(a) Name & Address of the school/ .....

12. STANDARD SEEKING IN AT PRESENT : .....

Medium of Instruction : .....

Whether qualified for promotion : .....

SUBJECT							TOTAL
MARKS							

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.  
Transfer Certificate  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.
- G. Fees once paid will not be refunded.

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

Signature: Father/Mother/ Guardian

(Full Name :.....)

Date.....

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			