

COORG PRE SCHOOL

P.O. Box 14, Genikoppal - 571 218, South Kodagu, Kodagu District, KARNATAKA STATE (Affiliated to Council for the Indian School Certificate Examinations, New Delhi)

APPLICATION FORM FOR ADMISSION

| Sex | of Birth: (Day)(Month)(Year) |
|--------|--|
| | : Male/Female 4. Mother Tongue : |
| (i) N | fationality |
| | Belongs to SC/ST/BC(v) Blood Group: |
| | er's Details: |
| | Name:(ii) Nationality: |
| (III) | Occupation |
| | |
| ***** | Pin Code |
| (v) | Telephone Number with STD/ISD Code : Off |
| (VI) | Email Address: Mobile. |
| | ther's Details: |
| | Name:(ii) Nationality: Occupation: |
| | Office Address |
| | Pin Code |
| | Telephone Number with STD/ISD Code : Off |
| | Email Address:Mobile |
| | dress of Correspondence: |
| | |
| | luk:Pin Code |
| | mual Income of the Parent |
| 775 | rticulars of the Guardian : Name |
| (iii | Correspondence Address |
| 0.00 | *************************************** |
| **** | Pin Code |
| |) Telephone Number with STD Code : Off Res. Email Address: Mobile |
| | |
| . N | ame of the Present School and Address |
| *** | |
| | andard in which the pupil is studying: |
| 00 0 | andard in which the pupil is studying: he Syllabus Followed; CBSE/ICSE/State Board/Any Other Specify; |
| | irst Language |
| | Was the Student a Boarder Earlier? : YES/NO. |
| |) If YES', Furnish the Name and Address of the School and Duration |
| | |
| 6. (i | Does the Student have any deformities, learning disability, etc.: YES/NO |
| |) If YES', furnish details : |
| 14 | , 1 1 50 ; 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| 7. Is | the Student a Passport holder 7 : YES / NO |
| | "YES", kindly furnish the following details: (Enclose Phtocopies) |
| i | Passport Number : |
| | Date of Issue |
| |) Date of Expiry |
| P |) Place of Issue |
| 8. I | Details of VISA: |
| | Date of Issue |
| | Date of Explry : |
| | |
| | Any other information of relevance |
| | |
| | |
| 20. 1 | Herewith I have enclosed a DD/Cash of Rstowards registration fee. |
| | Receipt No. : Date: |
| | V. |
| | |
| | |
| | Signature of Parent / Guardian |
| | |
| | DECLARATION |
| | * |
| I | the parent of declare that I have |
| | through the rules and regulations of the school and agree that I will not hold the school responsible fo |
| | ntoward accidents that might take place involving my ward and will not put in any kind of compensation |
| | for such mishaps. The school will not be liable for any damages / charges on account of loss of life |
| | aries which might be sustained by him / her while taking part in sports, swimming, trekking, nature camp |
| | curricular or any other form of activities of the school, within or outside the school premises. I ar |
| | that the school reserves the right to send my ward home, without informing me, if his / her stay in the |
| 30 M | us may precipitate situations detrimental to the cordial atmosphere in the campus. If my ward violate |
| | f the school rules and regulations and the school authorities deem it necessary, I shall withdraw my was |
| | the school. I understand that if I withdraw my child in the middle of any academic year, I forfeit the eyear's fee. |
| entife | year a rec. |
| Date | † |
| Place | Signature of the Parent |
| | |
| | |
| | FOR OFFICE USE ONLY |
| 1. | Reg. No. : |
| | |
| | Class to which admitted: |
| 2 | |
| 2 | Class to which admitted: Number and date of the TC produced and the name of the school last attended: |