

ADMISSION FORM

Class in which admission is sought		Session		Application Form Number	Serial Number: SMRJS/CAMPUS NAME/.....
Date of form collection		Date of interview (if any)		Date of form submission & admission	

DOCUMENT CHECKLIST

- ☐ Photographs of Child & Parents
 ☐ Birth Certificate of Child
 ☐ Address Proof of Child & Parents
 ☐ Photocopy of vaccination card
 ☐ Transfer Certificate from previous school (Class 2 & above)

Please affix latest Passport size photograph in colour

STUDENT

Please affix latest Passport size photograph in colour

MOTHER

Please affix latest Passport size photograph in colour

FATHER

DETAILS OF STUDENT

1.	Full Name (<i>in capital letters</i>)	SURNAME		FIRST NAME		MIDDLE NAME					
2.(a)	Date of Birth	DD/MM/YY		2. (b)	Date of Birth (in words)						
3.	Age as on March 31, 20__	YEARS MONTHS DAYS									
4. (a)	Nationality			4. (b)	Gender	MALE FEMALE 3 RD GENDER					
5. (a)	Aadhar Number			5. (b)	Languages spoken at home						
6. (a)	Religion			6. (b)	Category (pls attach certificates)	GEN	SC	ST	OBC	EWS	OTHERS
7. (a)	Previous School & Class (SCHOOL NAME & ADDRESS)										
7. (b)	No. & Date of TC issued by school					8. (a)	Blood Group				
8. (b)	Any special physical conditions? (pls specify if applicable)		8. (c)	Weather the last school was CBSE Affiliated if not specify name of the Board							
9.	Address										
10.(a)	Result of last Examination			10. (c)	Subject Proposed to Offer	1. _____	2. _____	3. _____			
10.(b)	Percentage					4. _____	5. _____	6. _____			

Declaration by Parents/ Guardians

I/We hereby declare that the above information furnished on this form is true and best to our knowledge and that we hereby certify that all parts of the information furnished is accurate. We are aware that furnishing of false information is a criminal offence punishable by Law.

(Signature)

(Signature)

Mother's Name: _____

Father's Name: _____



DETAILS OF PARENTS /GUARDIANS

1.	Full Name (<i>in capital letters</i>)	MOTHER	FATHER
2.	Mobile & Email ID		
3.	Occupation		
4.	Office Address and Number		
5.	Nationality		
6.	Aadhar Number		
7.	Local Guardian (if applicable) (with address)		

Please note:

- If parents are divorced/ separated/ widowed, kindly specify with whom is the child living:
- If parents are living outstation, kindly specify details of local guardians above & attach sheet if needed

TRANSPORT

School BUS/ VAN required?	☐ YES	☐ NO
Approximate distance from School		

Please note: Transport Facility subject to availability

OTHER GENERAL DETAILS

A. Brothers/ Sisters: Let us know about your family!

Name	Age	School	Class	Student at any Jaipuria branch?

B. Alumni details: Do you know any alumni of Jaipuria?

Name	School	Year	Relationship

C. Where did you hear about Jaipuria?

- ☐ FB
 ☐ Hoarding/Newspaper
 ☐ Website
 ☐ Word of Mouth
- ☐ Reference (specify): _____
 ☐ Others: _____

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(Signature)

(Signature)

Mother's Name: _____

Father's Name: _____

FOR OFFICE USE ONLY

This is to certify that all details as mentioned on the application form have been checked and relevant papers have been found to be in order.	
Date:	Name & Signature of Admission InCharge

The applicant may be given admission to Class _____, subject to all information and documents being in order and authentic, and realisation of applicable dues.

Date:

.....
PRINCIPAL

FOR FEE COUNTER USE ONLY

Name:			
Admitted to:	CLASS	SECTION	
Fee receipt Number:	RECEIPT NUMBER	Dated:	DD/MM/YY
Name has been entered in Class Attendance Register?		Yes	No
Student Registration Number in Admission Withdrawal Register is:	REGISTRATION NUMBER	REGISTER VOLUME	

Details of Fees received	
Registration Fees	
Admission Fees	
Composite Annual Fees	
Examination Fees	
Security Deposit	
TOTAL	
TOTAL (in words)	
Mode of payment & details	

Date:

.....
Office Supervisor/Accounts Officer

Admission considered by the School is in accordance with provisions of the Board, and approved.

Date:

.....
PRINCIPAL

Seth M. R. Jaipuria School, Rasra

School Address: Dehri- Kotwari Road, Rasra, Ballia-221712

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