

**SRINIDHI PUBLIC SCHOOL**

# 20, 21, 22, "A.M. Srinivas Garden", 1st Cross, 3rd Main, Srinidhi Layout  
 Chunchughatta Main Road, New Bank Colony, Bangalore-560 062.  
 Phone : +91 80 2632 4343 / 44, email: info@srinidhipublicschool.com

**APPLICATION FOR ADMISSION**

(Please refer the instructions before filling the form)

To,  
 The Principal  
**SRINIDHI PUBLIC SCHOOL**

Photo

Sir / Madam,

I request you to admit my Son / Daughter / Ward to ..... of your school for the academic year 201 - 201 . Particulars about the student are given here below :

|   |      |     |
|---|------|-----|
| 1. Name in full (Block Letters)   |      |     |
| 2. Male / Female  |      |     |
| 3. Date of Birth in figures & words<br>(Birth Certificate should be produced) |      |     |
| 4. Place of Birth   |      |     |
| 5. Mother Tongue  |      |     |
| 6. Numbers of Brothers  | Name | Age |
| Numbers of Sisters  | Name | Age |
| 7. Nationality  |      |     |
| 8. Religion   |      |     |
| 9. Last school attended with class,<br>Enclose the Transfer Certificate       |      |     |
| 10. Interests in Extra Curricular Activities<br>& Games                       |      |     |
| 11. Father's / Guardian's Name  |      |     |
| 12. Qualification   |      |     |
| 13. Occupation & Full address   |      |     |
| Phone No.   |      |     |
| 14. E-mail ID   |      |     |

|                                   |  |
|-----------------------------------|--|
| 15. Mother's Name                 |  |
| 16. Qualification                 |  |
| 17. Occupation and full address   |  |
| Phone No.                         |  |
| 18. E-mail ID                     |  |
| 19. Present Residential Address   |  |
| Phone No.                         |  |
| 20. Permanent Residential Address |  |
| Phone No.                         |  |
| 21. Annual Income                 |  |

## DECLARATION

I Certify that the information in this form and the documentation supporting it, is correct and complete.

I acknowledge that the provision of incorrect information or documentation or the withholding of information or documentation relating to my application, may result in the cancellation of admission.

Fee structure is subject to revision as SRINIDHI PUBLIC SCHOOL is a self financial institution.

Bangalore

Date.....

Signature of Parent / Guardian

## Kindly follow the Instructions before filling in the application

1. This form is not transferable.
2. Please use blue colour ink only.
3. Kindly enclose birth certificate/transfer certificate.
4. Any changes in the above mentioned details-address or contact number should be informed to the office immediately.
5. For any correspondence kindly quote the registration number.
6. Please attach four passport size photographs along with application.

### FOR OFFICE USE ONLY

- |                        |                               |
|------------------------|-------------------------------|
| 1. Admission Fee Recd. | 4. Birth Certificate Recd.    |
| 2. Tuition Fee Recd.   | 5. Transfer Certificate Recd. |
| 3. Term Fee Recd.      |                               |

Order.....

Bangalore

Date.....

Signature of the Principal