

REGISTRATION FORM

(KINDERGARTEN)

(Submission of Registration Form doesn't guarantee admission)

HOLY ANGELS SCHOOL

Rajpura-140 401 (PB.)

Distt. Patiala, Punjab, India



S.No.

POSTCARD SIZE
(RECENT photo of the child with Parents only,
not taken more than a month ago)

Note: Please complete this entire form in BLOCK CAPITALS

Form No.

Essential Information (Child & Parents' name should be according to Birth Certificate)

Affix a recent colour photo of the applicant here

First Name	<input type="text"/>
Middle Name	<input type="text"/>
Surname	<input type="text"/>
Gender	M <input type="checkbox"/> F <input type="checkbox"/> Date of Birth : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Category	General <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/>
Nationality	Blood Group
Aadhaar No.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Religion	<input type="text"/>
Class applied for	<input type="text"/>
Home Address	<input type="text"/>
Phone(s)	<input type="text"/>

Details of previous schooling

School	City	Class	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

For Office Use Only

Admission No.	<input type="text"/>	Class	<input type="text"/>
Date of Joining	<input type="text"/>	Section	<input type="text"/>

PARENT'S DETAILS

Mother's First Name	Father's First Name
Middle Name	Middle Name
Surname	Surname
Aadhar No. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Aadhar No. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Occupation/Designation	Occupation/Designation
Organisation	Organisation
Monthly Income	Monthly Income
Phone(s)	Phone(s)
Fax <input type="text"/>	Mobile <input type="text"/>
e-mail	e-mail

If single parent, Please specify

FAMILY INFORMATION

STUDENT LIVES WITH	Both Parents <input type="checkbox"/>	Mother <input type="checkbox"/>	Father <input type="checkbox"/>	Other <input type="checkbox"/>
LEGAL CUSTODY	Both Parents <input type="checkbox"/>	Mother <input type="checkbox"/>	Father <input type="checkbox"/>	Other <input type="checkbox"/>
Correspondence to :-	Both Parents <input type="checkbox"/>	Mother <input type="checkbox"/>	Father <input type="checkbox"/>	Other <input type="checkbox"/>
(Check if appropriate)	Father Deceased <input type="checkbox"/>	Parents Divorced <input type="checkbox"/>	Father Re-Married <input type="checkbox"/>	
	Mother Deceased <input type="checkbox"/>	Parents Divorced <input type="checkbox"/>	Mother Re-Married <input type="checkbox"/>	
	Parents living outside India <input type="checkbox"/>		Parents not living in Rajpura <input type="checkbox"/>	
	One Parent not living in Rajpura <input type="checkbox"/>	Father <input type="checkbox"/>	Mother <input type="checkbox"/>	

In case the parents are separated or divorced, Please provide the supporting documents & Indicate the arrangements between parents regarding visitation rights.

Mothers/Guardians Signature

Fathers/Guardians Signature

SIBLING(S), IF ANY, DETAILS

Name	Age	School	Class
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are the child's parents Ex-students of Holy Angels School ?

Father Yes No Mother Yes No

a) If yes, year of passing ICSE

b) Years studied in Holy Angels School year to

c) Class to Class

GUARDIAN(S), IF ANY, DETAILS

First Name	Address
Middle Name	Phone
Surname	Relation with child

IN CASE OF AN EMERGENCY

Please indicate allergies, history of asthma, epilepsy or other major illness, if any.

EMERGENCY CONTACTS

Name	Name
Phone	Phone
Relation	Relation

Name & Ph. No. of Family Doctor :

Emergency contact (other than parent)

Name Ph.No. Relation **Note :** In case the school authorities are unable to contact you or the designated emergency contacts, your child will be administered medical aid to the best of our ability.

General Information :

- The academic year is from March 2018 to March 2019
- **Eligibility for 2018-2019 session.**
- Children born between April 1, 2013 & March 31st, 2014 are eligible for admission to Nursery (If your child is not within the age limit specified, He/She will NOT be considered for admission).
- Registration form can be collected from school.
- The form duly filled must be submitted in the school office. (Timing 9 a.m. to 11 a.m.)
- Incomplete forms/those filled with incorrect information/unattested forms or forms without all the required documents, will NOT be considered for draw of lots/admission.
- If the names & surnames given in the registration form do not match with the Birth Certificate of the child, the registration form will be considered incomplete & will NOT be considered for admission.
- No alteration will be permitted in the registration form once the same has been submitted. Hence you are strongly advised, If you so desire, that the necessary rectification like addition/deletion of the name/surname/parent's names/is done legally from the authorities before submission of the registration form.
- In case it comes to the knowledge of the management at any point that the information furnished is incorrect or wrong that the admission will stand cancelled without having any right to claim any refund of the fees paid.
- Registration doesn't guarantee admission. The admission process will be considered complete only on completion of all formalities of admission & payment of fees with in the stipulated time.
- Original of all the documents must be produced at the time of admission, to permit verification. In case, on verification, any document is found to be fabricated /forged/tampered with, the management reserves the right to cancel the admission.
- Only one application form per child will be accepted. In the event of it being discovered that more than one application has been submitted for a child, all the forms will stand rejected & the candidate is disqualified.
- Forms & all the accompanying documents/photograph, once submitted, will become property of the school & shall not be returned.
- Please ensure that the acknowledgment slip given to you is retained & produced whenever you come to the school regarding all future dealings pertaining to admission.

I hereby certify that I have carefully read all the instructions and agree to abide by them.

Signature of Mother/Legal Guardian.....

Signature of Father/Legal Guardian.....

IMPORTANT DOCUMENTS TO BE ATTACHED TO THE APPLICATION FORM

1. Two family and two passport size photographs of the applicant. (White background)
2. One passport size photograph of each parent
3. Attested photocopy of birth certificate.
4. Attested photocopy of Passport, Visa and Resident Permit in case of foreign national.
5. Attested photocopy of Residence proof (Voter ID Card, Aadhar Card, Ration Card, Electricity Bill, Gas Connection, Passport)
6. Attested photocopy of Aadhar Card / Enrolment slip of Candidate, Father & Mother.
7. Alumni - School leaving certificate/Class 10th/Pass certificate
8. Sibling in school - Copy of Birth Certificate of sibling with parents name clearly indicated
9. Any other documents (photocopies) related to the child's accomplishments in the field of academics, sports and / or co-curricular activities.
10. Baptism Certificate (For Christian Students only*)

DECLARATION

- a) I/We have read & understood the terms & conditions of the Admission process.
- b) I/We understand and agree that the registration of my child does not guarantee admission to the school.
- c) I/We agree to abide by the School's Rules in all respects and accept that these rules may be changed from time to time without notice.
- d) I/We understand that any discrepancies/contradiction in this form will result in rejection and re-submission of this form.
- e) I/We consent to our child being administered first aid and/or call on medical advice in case of an emergency as deemed fit by the school.
- f) I/We declare that the above information provided by us is correct.
- g) I/We accept the process of admission undertaken by school.
- h) I/We abide by the decision taken by the school/management. No claim in this regard will be entertained at the later stage for any mistake made by me or us.
- i) I/We also accept in any eventuality if we are unable to pay our child's fee, we will withdraw him/her from the school and will not seek a concession.

Name of Mother/Legal Guardian

Name of Father/Legal Guardian

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Signature of Mother/Legal Guardian.....

Signature of Father/Legal Guardian.....

Date : E-mail : Mobile No.