

ADMISSION FORM



INDIAN INTERNATIONAL SCHOOL

Kyalanur - 563151, Kolar District. Karnataka,
Mob No: 9620780005 / 8105486878 /
9986447776. E mail: dussact1@gmail.com
and indianinternationalschool@yahoo.com

Affix
Photo

APPLICATION FOR ADMISSION TO CLASS

No. :

Admission No.		Academic Year		Application Date	
1. Applicant's Name in full			Gender <input type="checkbox"/> M <input type="checkbox"/> F		
2. Date of Birth		D <input type="text"/> <input type="text"/> <input type="text"/> M <input type="text"/> <input type="text"/> Y <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	3. Nationality		
4. Place of Birth		5. Mother Tongue			
6. Religion		7. Caste (if applicable)		Category	
8. Name of the school last attended & Address					
9. Classes attended in that school					
10. Residential Address - Parent			Residential Address - Guardian		
			Mobile :	Res. :	
11. Father's Name :			Office Address :		
Nationality					
Occupation					
Mobile No.		E-mail :			
12. Mother's Name :			Office Address :		
Nationality					
Occupation		E-mail :			
Mobile No.					

GARDEN OF KNOWLEDGE, FAITH AND VIRTUE

13. Name and class of BROTHERS / SISTERS
(not cousins) if any in this School

- 1
- 2
- 3

We hereby agree to abide by the rules of the School with regard to fee policy and transport facility.
We hereby declare that the information furnished above is true and correct.

Date :

Signature of Parent

Documents required at the time of admission :

- Two copies of the child's latest passport size (colour) photograph
- Transfer certificate from the previous school (original)
- Birth certificate (attested copy)
- Attested copy of the last report / marks card
- Aadhar card copy

FOR OFFICE USE ONLY

The above child is admitted to this institution onto class

Fee Receipt No. All the details are checked and verified by

Any Observation :

Principal

Office Assistant



