



SRI RAJESHWARI VIDYANIKETAN

HULKOTI-582205 GADAG DIST. (KARNATAKA)

APPLICATION FORM FOR ADMISSION

Resident / Day Scholar

1. Name of the Pupil(Block Letters)
2. Date of Birth:(In words).....
3. Place of Birth 4. Sex: Male/ Female
4. (i) Nationality..... (ii) Religion..... (iii) Caste
- (iv) Caste certificate No.....
- (v) Belongs to SC/ST/OBC/Others (vi) Minority.....
- (vii) Mother Tongue(viii) Aadhar Number
- ix) Bhgyalaxmi Bond No.:
5. **Father's Details:**
 - (i) Name: (ii) Qualification
 - (iii) Occupation:
 - (iv) Telephone Number with STD/ISD Code: Off..... Res.....
 - (v) Mobile Number:..... (vi) Smart Phone: Yes / No
 - (vii) E-mail ID:.....
 - (viii) Aadhar Number
 - (ix) Ration Card: APL/ BPL/ Others No.:.....
 - (x) Father's Caste Certificate No..... (xi) Father's Caste.....
6. **Mother's Details:**
 - (i) Name:(ii) Qualification
 - (iii) Occupation:
 - (iv) Telephone Number with STD/ISD Code: Off..... Res.....
 - (v) Mobile Number:..... (vi) Smart Phone: Yes / No
 - (vii) E-mail ID:.....
 - (viii) Aadhar Number
 - (ix) Ration Card: APL/ BPL/ Others No.:.....
 - (x) Mother's Caste Certificate No.....(x)Mother's Caste.....

7. Address of Correspondence:
.....
.....Pin code

8. Annual Income of the Parent:.....

9. Particulars of Guardian:

(i) Name: (ii) Occupation:

(iii) Correspondence Address:.....

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..... Pin Code:.....

(iv) Telephone Number with STD Code: Off..... Res.....

(v) E-mail Address:.....

10. **Previous School Details** : (If applicable)

i) Name of the last school attended and Address.....

.....

.....Pin code.....

ii) Dis Code No:.....

iii) Student I.D No.....

iv) Standard in which the pupil is studying:.....

v) Medium of Instruction:.....

vi) The Syllabus followed: CBSE/ICSE/State Board/ Any Other Specify:.....

vii) First language:.....Second language:.....Third language:.....

11. (i) Was the student a Border Earlier ? Yes / No

(ii) If 'YES', furnish the Name and Address of the School and Duration:.....

(iii) Reasons for Withdrawal:.....

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12. Class for which admission is desired.....

13. Disability Child : Not Applicable Autism Physically Handicapped
 Hearing Impartement Learning Disability Loco motor impairment
 Mental Retardation Muiltipal Disability Speech Imparement
 Visual Impairment Visual Impairment Cerebral Palsy
(Blindness) (Low-vision)

14. Special Category : None Destitute HIV Case Orphans Others (Please specify)

15. Student / Parent's Bank Name and A/c No.:.....

Bank IFSC code:..... Bank Name:

DECLARATION

I.....the parent/guardian of.....
Declare that I have gone through the rules and regulations of the school and agree that I will not hold the school responsible for any untoward accidents that might take place involving my ward and will not put in any kind of compensation claim for such mishaps. The school will not be liable for any damages/ charges on account of loss of life or injuries which might be sustained by him/her while taking part in sports, swimming, trekking, nature camp, extra-curricular or any other form of activities of the school reserves the right to send my ward home, without informing me, if his/her stay in the campus may precipitate situations detrimental to the cordial atmosphere in the campus. If my ward violates any of the school rules and regulations and the school authorities deem it necessary, I shall withdraw my ward from the school.

Signature of the Parent/Guardian.....

FOR OFFICE USE ONLY

1. Reg.No:.....
2. Class to which admitted:.....
3. Number and date of the TC produced and the name of the school last attended
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4. Fee Paid Rs.....Receipt No..... Date.....

Date:

Registrar

Principal