



# VINAYAK INTERNATIONAL SCHOOL

An English Medium Co-Educational School

Address : Kishanpur, Near Bypass, Faridpur, Bareilly. Mob.: 7830288444, 7830288666

## ADMISSION FORM

Admission Date: \_\_\_\_\_

Admission No: \_\_\_\_\_

Affix photo of Father

Affix photo of Mother

Affix photo of Student

Admission required for : \_\_\_\_\_

Note : Please use capital letters only.

We, \_\_\_\_\_ and, \_\_\_\_\_ wish to admit our son/daughter/ward whose particulars are given below as a day scholar at Vinayak International School.

### A. INFORMATIONAL OF THE CHILD

First Name

\_\_\_\_\_

Middle Name

\_\_\_\_\_

Last Name

\_\_\_\_\_

Gender

Male  Female

Date of Birth

DD MM YY

Date of Birth in words

\_\_\_\_\_

Blood Group

\_\_\_\_\_

Religion

\_\_\_\_\_

Caste

\_\_\_\_\_

Nationality

\_\_\_\_\_

Aadhar No

\_\_\_\_\_

Community

SC

ST

OBC

GEN

OTHERS

Languages known

\_\_\_\_\_

Mother Tongue

\_\_\_\_\_

### RESIDENTIAL ADDRESS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Father's Mobile No.: \_\_\_\_\_  
E-mail ID: \_\_\_\_\_

### CORRESPONDENCE ADDRESS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Mother's Mobile No.: \_\_\_\_\_  
\_\_\_\_\_

NOTE: IN CAPITAL LETTERS ONLY

Distance from school (in kms): \_\_\_\_\_

Preferred Phone Number for school SMS: \_\_\_\_\_

Emergency Contact No. (Res/Mobile)	Name of the person to be contacted	Relationship

## FAMILY INFORMATION

### Father/Guadian:

Name:	Age:	Nationality:
Educational Qualification:	Institution:	
Occupation:	Office Address:	
Designation:		
Annual Income:	Tel:	
Aadhar No :		

### Mother/Guadian:

Name:	Age:	Nationality:
Educational Qualification:	Institution:	
Occupation:	Office Address:	
Designation:		
Annual Income:	Tel:	
Aadhar No :		

Single Parent:

Tick one, only if applicable

Father	Mother
If child is sponsored (Name of sponsoring agency)	
Permanent Address:	

### Details of Brothers / Sisters of the student

Name	Age	Name of the Institution	Standard

Incase of staff ward:

Name of the parent:

## B. DETAILS OF PREVIOUS STUDY

Year	School	Standard/Grade	Grade/Marks obtained in final exams

The Previous school affiliated to:

U.P.

CBSE

ICSE

OTHER

Awards won so far in sports, arts or academics

## MEDICAL HISTORY OF THE CHILD

### BIRTH HISTORY :

Birth Details : Normal  Caesarian  Forceps

Birth Cry : Immediate  Delayed

Discharge from Hospital : \_\_\_\_\_ (Number of days)

Specialize care given in the hospital : Yes  No

If Yes, NICU :  Extended hospital stay

Explain: \_\_\_\_\_  
\_\_\_\_\_

### HEARING :

Any difficulty observed : Yes  No

Any Consultation with doctor done : Yes  No

If Yes, Explain: \_\_\_\_\_  
\_\_\_\_\_

### VISION :

Any Consultation with doctor done : Yes  No

Use of Spectacles/Corrective Lenses : Yes  No

### MOTOR MILESTONES (Approx Months) :

Sitting : \_\_\_\_\_

Standing : \_\_\_\_\_

Walking : \_\_\_\_\_

Speech : \_\_\_\_\_

Any medication taken for any medical conditions, Such as attention deficit / thyroid (hypo/hyper)/any other condition :

\_\_\_\_\_  
\_\_\_\_\_

Any Medication taken for general well being :

\_\_\_\_\_  
\_\_\_\_\_

Any Allergy / any medical information that school should be aware of :

\_\_\_\_\_  
\_\_\_\_\_

**C. ENCLOSURES** (All documents are mandatory at the time of admission)

- Birth Certificate
- Transfer Certificate - original copy (if applicable)
- Study Certificate
- Vaccination Card Copy
- Blood Group Report
- Passport size photos of child (5 copies)
- Passport size photos of parents (3 each)
- Passport size photos of guardian (3 each)
- Aadhar card copy of Child
- Aadhar card copy of parents
- Copies of progress report cards for the last 3 years
- Community Certificate : for Scheduled Castes, Scheduled Tribes or Backward Communities  
above documents (recently attested photocopies ) must be produced along with the filled application form.
- Transportation Form (if Required)

Please note: Staple all documents to the top left-hand corner of the application

**D. MISCELLANEOUS**

How did you hear about the Vinayak International School?

Name of news paper	Website	Name of the Magazine	Others (please specify)/ hoardings/pamphlets/ word of mouth/ catalogue
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**DECLARATION**

I, \_\_\_\_\_ have the authority to admit my child /ward \_\_\_\_\_, into the school as the parent/ legal guardian. I undertake the responsibility of providing any evidence needed to support the information provided here, if necessary for any reason. I declare that the statements provided in this application are correct to my knowledge and if found otherwise, I shall abide by the decision of the management. I agree to abide by the rules, regulations and the fee structure of the school.

Date: \_\_\_\_\_

Signature of Parent / Guardian  
\_\_\_\_\_

**For Vinayak International School Office use only**

REMARKS	
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Students Sign.	Parents/Guardian Sign.

Admission Co-ordinator  
Date \_\_\_\_\_

Head of the Institution  
Date \_\_\_\_\_