



Global Indus Valley School

Managed by : Global Dehat Vikash Shiksha Samiti

Affiliated to C.B.S.E, N.Delhi, Aff. No. 1730641, School Code-16494

Kotkasim, Near Dharamkanta, Distt. Alwar -301702 (Raj.)

Tel: +91-9610405999, +91-8440909050

Website : www.globalindusvalleyschool.com

E-mail : mkskivs2015@gmail.com, givskotkasim@gmail.com

Purity of Education is the Power

PROVISIONAL ADMISSION FORM

ADMISSION NO _____

(TO BE FILLED IN BY PARENT/LEGAL GUARDIAN)

Important : 1. Please answer all questions and write the information clearly in BOLD, using black or blue pen.
2. Please Tick (✓) mark, wherever it is required.

GENERAL INFORMATION

Please affix latest
Passport size
photograph in colour

I/We are Applying for enrolment in Class with effect from month/year

Whether Applying for : Day Scholar Yes No

Hostel Yes No

STUDENT

PERSONAL DATA OF STUDENT

Surname First Name Middle Name

Date of Birth Age as on 1st April Years Months Days Nationality

DOB (in words)

Gender(Male/Female) Mother Tongue Languages spoken at home

Permanent Address

Home Tele # Mob # E-mail

Mailing Address, if different

City Pin code Country

HEALTH INFORMATION

Allergy/Chronic ailment if any Physical handicap/disability if any

Any other health problem

PARENT'S/GUARDIAN'S INFORMATION

Father's/ Guardian's Name	<input type="text"/>	Age	<input type="text"/>	Nationality	<input type="text"/>	Educational Quali.	<input type="text"/>	
Mother's Name	<input type="text"/>	Age	<input type="text"/>	Nationality	<input type="text"/>	Educational Quali.	<input type="text"/>	
Student lives with :	<input type="checkbox"/>	Parents	<input type="checkbox"/>	Father	<input type="checkbox"/>	Mother	<input type="checkbox"/>	Others
If other than parents, Give Reasons :								

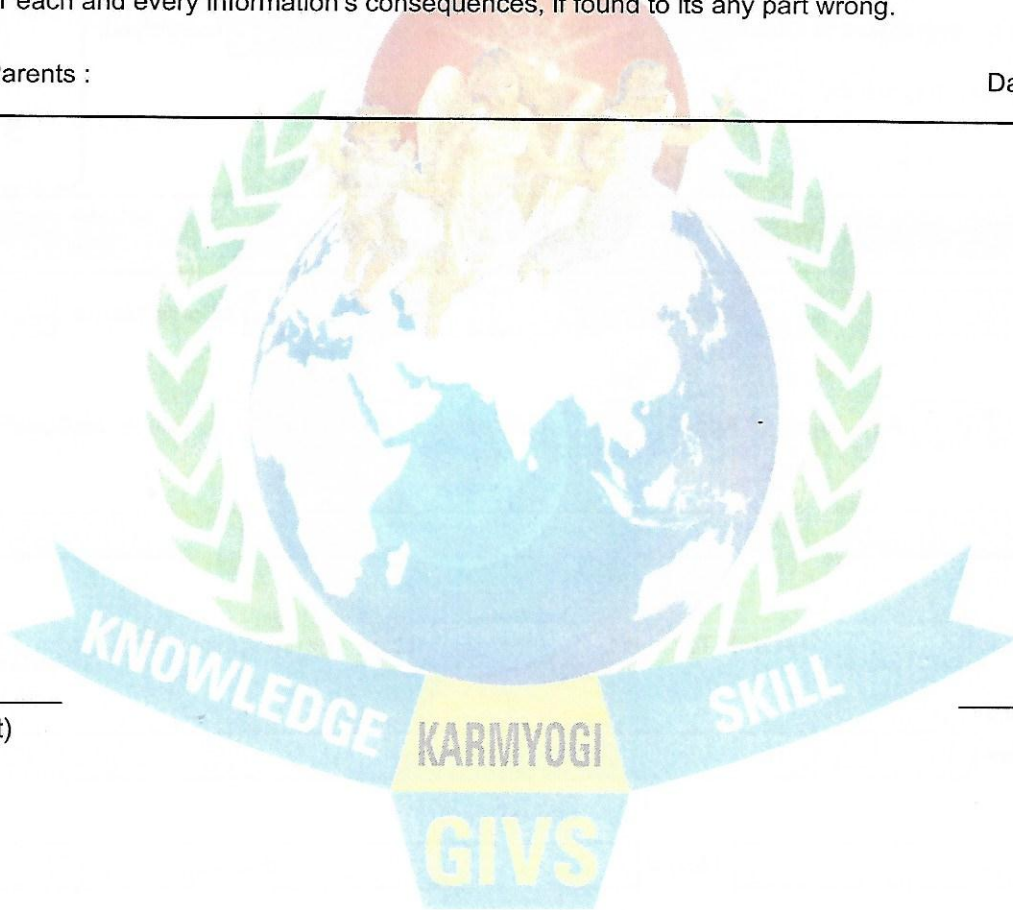
TRANSPORT

School Bus required	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
---------------------	-----	--------------------------	----	--------------------------

DECLARATION / UNDERTAKING

I/We certify that the information furnished in this form are true to the best of my/our knowledge and belief. I/We will be responsible for each and every information's consequences, if found to its any part wrong.

Signature of Parents : _____ Date: _____



(Accountant)

(Principal)