



Saraswati Devi

International School

Learning Re-
Defined

PLEASE FILL UP THE FORM IN BLOCK LETTERS

Admission Form

Form No: _____



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Please affix colour
photograph of the
student

DO NOT STAPLE

Form No: _____

Admission No: _____

For Class: _____ Session 2017-2018

PLEASE FILL UP THE FORM IN BLOCK LETTERS

GENERAL INFORMATION

Name of the student : _____

Date of Birth : _____

Gender : Male Female (Put a tick mark) (Fill in words)

Blood Group : _____ Caste : GEN

Minority : _____ (Yes/ No) (Put a tick mark) SC

Nationality : _____ ST

Religion : _____ OBC

Mother Tongue : _____ Physically Challenged : _____ (Yes/ No)

Special interest in Co curricular Activities: _____

Any other Details about the child's Health otherwise which you feel the school should be informed about : _____

Please mention the second language : _____ Third language _____

PREVIOUS SCHOOL INFORMATION

School Name : _____ Class : _____

School Address : _____ Admission no : _____

(Please attach transfer certificate, character certificate and other documents along with this form)



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COMMUNICATION ADDRESS

Permanent Address

House no : _____ Street Name : _____
Village : _____ Post Office : _____
Police Station : _____
Municipality / Panchayat : _____
Block / Sub-Division : _____
District : _____ State : _____
PIN Number : _____ Contact Number : _____

Current Address

House no : _____ Street Name : _____
Village : _____ Post Office : _____
Police Station : _____
Municipality / Panchayat : _____
Block / Sub-Division : _____
District : _____ State : _____
PIN Number : _____ Contact Number : _____

In case of any change of address, please inform immediately

Puabagan, Damodarpur, NH-60A, Bankura



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PARENTAL INFORMATION

Father's Information

Name : _____

Occupation : _____

Office Address : _____

Email : _____

Monthly Income (Rs.) : _____

Office Contact : _____

Mobile Number : _____

Please affix colour
photograph of the
FATHER OR
GUARDIAN

DO NOT STAPLE

Mother's Information

Name : _____

Occupation : _____

Office Address : _____

Email : _____

Monthly Income (Rs.) : _____

Office Contact : _____

Mobile Number : _____

Please affix colour
photograph of the
MOTHER

DO NOT STAPLE

IN CASE OF EMERGENCY KINDLY CONTACT

Name : _____

Contact Number : _____

Relation with child : _____



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HOSTEL INFORMATION

Do you want to opt hostel accommodation: Yes No

Type of Hostel Room Opted: A.C. Room NON- A.C. Room

Any Special problem you feel should come under our notice: _____

Nature of food Opted: Vegetarian Non-Vegetarian

Any Food you Child is Allergic to: _____

Do you want to opt Jain food: Yes No We also provide JAIN Food

UNDERTAKING

I _____ do hereby declare that all the information furnished by me is true and correct to the best of my knowledge and belief and also certify that my Son/ Daughter is _____ applying for hostel accommodation on SDIS campus with my permission and I undertake to that I shall be responsible for his/her good behavior in the campus and shall accept all decisions of the Management as shall be assigned to these effect. I shall also be responsible to pay all the hostel dues, if any, against my son / Daughter.

Signature of Father/ Guardian



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TRANSPORT INFORMATION

Do you want to opt Transport Facility : Yes No

Route Option : _____

Pick-up Point: _____

RULES & REGULATIONS

Keeping in view the safety of your child we would like you to undertake the following rules and regulation as framed by the management of the institution which is mentioned herein below :

1. Students should form a line before boarding and off-loading from the bus.
2. Students should maintain complete discipline in the bus stand as well as in the school bus.
3. Students should speak silently among each other while riding the school bus.
4. Student should silently take the sit on boarding the bus.
5. Other rules as may be given in the student's rule book.

UNDERTAKING

I _____ do hereby agree that my ward _____
Rules and regulations to avail the transport facility . I undertake to that I shall be responsible for his/her good behavior in the vehicle and shall accept all decisions of the Management as shall be assigned to these effect. I shall also be responsible to pay any or all the Fees dues, if any, against my son / Daughter. At the same time I shall abide by the rules and regulations of the institution that may be changed from time to time for the effective management of the institution.

Signature of Father/ Guardian



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UNDERTAKING

I _____ do hereby declare that all the information furnished by me is true and correct to the best of my knowledge and belief . I undertake to that I shall be responsible for his/her good behavior in the campus and shall accept all decisions of the Management as shall be assigned to these effect. I shall also be responsible to pay any or all the Fees dues, if any, against my son / Daughter. At the same time I shall abide by the rules and regulations of the institution that may be changed from time to time for the effective management of the institution.

Signature of Father/ Guardian

PLEASE ATTACH THE FOLLOWING DOCUMENTS

- Birth Certificate
- ID Proof of Guardian/Father
- Address Proof
- Xerox copy Ration Card
- Transfer Certificate (In case of Migration)
- Xerox copy of Report card (In case of Migration)

REGISTERED INFORMATION

Registered Number : _____

Registered Email ID : _____

Puabagan, Damodarpur, NH-60A, Bankura



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