



MY CHHOTA SCHOOL

World Class Education For Everyone

Office Address 205, 2nd Floor HB Twin Tower Near Starbucks Coffee
Shop Netaji Subhash Place, Pitampura Delhi-110034
Contact : 91+9821991565, 8447291675 | Email : info@mychhotaschool.com
Website : www.mychhotaschool.com

ADMISSION FORM

ADMISSION Date:

ADMISSION No:

Affix photo of Father

Affix photo of Mother

Affix photo of Student

Admission in Class :

INFORMATION OF THE CHILD

First Name

Last Name

Gender

Date of Birth

Date of Birth in words

Male Female

DD MM YY

Blood Group

Religion

Nationality

Aadhar No.

Mother Tongue

RESIDENTIAL ADDRESS

CORRESPONDENCE ADDRESS

Father's Mobile No.:

Mother's Mobile No.:

E-mail ID:

E-mail ID:

Distance from school(in Kms):

Preferred phone number for school SMS:

Emergency Contact No.	Name of Person to be Contact	Relationship

FAMILY INFORMATION

Father/Guradian:

Name:	Date of Birth	DD	MM	YY	Nationality:
Educational Qualification	Institution				
Occupation:	Office Address:				
Designation:					
Annual Income:	Tel:				
Aadhar No:					

Mother/Guradian:

Name:	Date of Birth	DD	MM	YY	Nationality:
Educational Qualification	Institution				
Occupation:	Office Address:				
Designation:					
Annual Income:	Tel:				
Aadhar No:					

Details of Brothers/Sisters of the student

Name	Date of Birth	Name of the institution	Standard
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

MEDICAL HISTORY OF CHILD

BIRTH HISTORY

Birth Details : Normal Caesarian Forceps
Birth Cry : Immediate Delayed

MOTOR MILESTONES (Approx Month):

Sitting : _____
Standing : _____
Walking : _____
Speech : _____

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

Describe your child interest area

ENCLOSURES (All document are mandatory at the time of admission)

- Vaccination Card Copy
- Aadhar Card Copy of Parents & Child
- Passports size photo of child (5 copies)
- Passports size photo of parents (2 each)

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. I agree to abide by the rules. regulations and the fee structure of the school

Date

Signature of Parent / Guardian

Admission Co ordinator

