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KIDS' FOUNDATION

A CBSE Affiliated School
Affiliation No. 1230049

APPLICATION FOR REGISTRATION

1. Affix 3 passport size Photograph
2. Class X Certificate & Mark Sheet

To,
The Administrator,
KIDS' FOUNDATION
Airport Road, Ghari, Imphal

Dear Madam,

Please register my son/daughter/ward as per particulars given below which I certify are true and correct to the best of my knowledge and belief. I agree to abide by all the rules and regulations that may be laid down by the school administrator. Further, I agree to co-operate whole heartedly with the staff and the Governing Body of the School.

I understand and agree that registration of my son/daughter/ward does not guarantee him/her admission into the school.

Signature of Parent/Guardian

Date ..... Full Name .....

PUPIL'S DETAILS :

i) FULL NAME OF THE PUPIL : .....

ii) CATEGORY: GENERAL ☐ / SC ☐ / ST ☐ / OBC ☐ / SPORTS ☐

iii) DATE OF BIRTH: / / iv) AADHAR NO.: ..... v) BLOOD GROUP: .....

vi) CLUB PREFERRED: a. FINANCIAL CLUB ☐ b. DEBATE CLUB ☐ c. DOODLING CLUB ☐

d. MUSIC CLUB ☐ e. LEO CLUB ☐ f. 3-D PRINTING CLUB ☐ g. SPORTS CLUB ☐

vii) FIRST LANGUAGE OF THE PUPIL : .....

viii) NAME OF THE SCHOOL LAST ATTENDED : .....

ix) MARKS & PERCENTAGE SCORED IN CLASS X : ..... x) BOARD .....

xi) ANY SPECIAL ACHIEVEMENT/AWARD/MEDAL : .....

PARENTS' DETAILS

i) FULL NAME OF FATHER : .....

AGE: ..... PROFESSION: ..... PHONE NO. .....

ii) FULL NAME OF MOTHER: .....

AGE: ..... PROFESSION: ..... PHONE NO. .....

iii) PERMANENT ADDRESS: .....

Signature of Pupil

.....

TO BE FILLED BY THE SCHOOL OFFICE

REGISTRATION NUMBER : ..... DATE : .....

DATE FOR : ..... INTERACTION / INTRODUCTION TIME : .....

DECISION : .....

CHECKED BY .....

PRINCIPAL'S REMARKS : .....

DATE : .....

Signature of Principal

Academic Coordinator