FORM NO. 1831



TM

Gujarat Public School

(Residential)

ADMISSION FORM

Admission sought as	Regular Day	Hostel	Affix Passport Size Photograph 35mm x 35mm
Board : GSEB CBSE	Admission sought in stand	ard	
Student Detail Student's Name			
	Surname	First Name	Middle Name
7 N	(MM) (YYYY) Sex		Place of Birth :
Nationality	Caste & Religion		SC/ST
Residential Addres	S		
City	PIN	State	Country
Tel. No. (Res.)	Mot	pile	(Office)
. Family History			
Student is living wi	th Both parents Mot	her Father Others	(please name)
If other than both	parents Parents separat	ed/Divorced Father de	eceased Mother deceased
Language(s) spoke	n at home	English is spo	oken at home (Yes/No)
. Educational Hist	ory		
Current School (W	here the child is studying nov	w)	
Namo		THE PARTY OF THE PARTY.	y in the man of the state of the
Ivallie			the business of the same
			Di-
Address			PIN
Address			Pin Tel. No

Has vo	The state of the s	ppropriate answer)			
,	our child ever received a	double promotion	Yes / No		
Has you	ur child ever been identifie	ed as gifted or talented?	Yes / No		
Has you	ur child ever been detaine	d? Grade	Yes / No		
Has you	ur child ever been suspend	ded from school?	Yes / No		
If yes, t	hen specify	E ENNESS	HERE BEEF	BETHERE	
	ur child ever been identifie indicate learning disability	ed as having a special learning area.	disability? Yes / No		
Rea	ading L	anguage Mat	hematics		
and the second second	curricular Activities list your child's hobbies/in	terests		A STATE OF THE STA	
Does th	ne child play any musical i	actrument? Name	For how m		
		istrument: Name	For now m	any years	
Achie	evements	DANCE	and the second s		
	MUSIC	DANCE	SPORTS	OTHERS	
E. Transp	port Facility				
Would		nsport facility?	No Others:		
	your child be suing tra		No Others :		
			No Others:		
F. Medic	your child be suing tra al Examination Repo gency Contact	rt			
F. Medic	your child be suing tra al Examination Repo gency Contact	rt	No Others : Tel. Nos. to ca	II	
F. Medic Emerg Persor	your child be suing tra cal Examination Repo gency Contact in to call	rt Relationship			
F. Medic Emerg Persor Family	your child be suing tra cal Examination Repo gency Contact in to call	rt Relationship	Tel. Nos. to ca	The state of the state of	
F. Medic Emerg Persor Family Is he/s	your child be suing tra cal Examination Report gency Contact in to call y doctor's name she physically fit?	Relationship Yes No	Tel. Nos. to ca	proper specs	
F. Medic Emerg Person Family Is he/s Mentio	your child be suing tra cal Examination Report gency Contact in to call y doctor's name she physically fit?	Relationship Yes No al abnormalities	Tel. Nos. to ca	Indicated and the second secon	
F. Medic Emerg Person Family Is he/s Mentio	your child be suing tra cal Examination Report gency Contact in to call y doctor's name she physically fit? on if any physical/ment Group	Relationship Yes No al abnormalities Height	Tel. Nos. to ca Tel. No Weight	Transmitted and the second sec	
F. Medic Emerg Person Family Is he/s Mention Blood Vision	your child be suing tra cal Examination Report gency Contact in to call y doctor's name she physically fit? on if any physical/ment Group	Relationship Yes No al abnormalities Height	Tel. Nos. to ca Tel. No Weight Remarks		
F. Medic Emerg Person Family Is he/s Mentic Blood Vision	your child be suing tra cal Examination Report gency Contact in to call doctor's name she physically fit? on if any physical/ment Group	Relationship Yes No al abnormalities Height +	Tel. Nos. to ca Tel. No Weight Remarks	THE RESERVE TO STATE OF THE PARTY OF T	
F. Medic Emerg Person Family Is he/s Mention Blood Vision Allerging Is your	ral Examination Report gency Contact in to call doctor's name she physically fit? on if any physical/ment Group - ies child allergic to anythin	Relationship Yes No al abnormalities Height +	Tel. Nos. to ca Tel. No Weight Remarks	The part of the same of the sa	
F. Medic Emerg Persor Family Is he/s Mention Blood Vision Allergi Is your If yes, v	ial Examination Reported From the Contact of the Co	Relationship Yes No al abnormalities Height +	Tel. Nos. to ca Tel. No Weight Remarks	The part of the same of the sa	
F. Medic Emerg Person Family Is he/s Mention Blood Vision Allerging Is your If yes, we	ial Examination Reported From Lead Examination Reported From Lead Lead Lead Lead Lead Lead Lead Lead	Relationship Yes No al abnormalities Height + ng? Yes / No ic to?	Tel. Nos. to ca		
F. Medic Emerg Person Family Is he/s Mention Blood Vision Allergi Is your If yes, v	your child be suing tra cal Examination Report gency Contact in to call y doctor's name she physically fit? on if any physical/ment Group child allergic to anythin what is your child allerg our child have asthma?	Relationship Yes No al abnormalities Height + ng? Yes / No ic to?	Tel. Nos. to ca		

	Parent(s)/Guardian Resource	es				× 1
	We are keen to use talent and re program. Please indicate if you					t can enrich our school
	Substitute Teaching	Classroom Volu	inteer		Coacl	ning Sports
	After School Tutoring	Specialised Tead	ching of I	Music 🗌	Art	
	Dance	Drama				
	For any other activity (please m	ention)	(Ingel	Company L		been of the part of
	FAMILY INFORMATION	the waste of the sales				
Н.	Father's/Guardian's Detail					
	Name	(I DA INICIONALIS	uda sel	upared to 2	Mary Land	our circlo-ma
	Nationality	aste & Religion	in and i	SHE BILL S	SC/ST	Carried Sciences
	Qualifications	To all the same				Service Business
	Name of Organisation				Designation _	
	Business/Office Address					
	Tel. No. (Res.)	(office	9)	at telephon	Pin Fax	THE RESIDENCE
		Mobile_				
	Monthly Family Income					nemalicani de la compania del compania del compania de la compania del compania de la compania del compania de la compania de la compania de la compania de la compania del
	Signature (for school record)					
I.	Mother's Detail	and with-ben	11.191	al bastusett		
å.						
	NameSurname		First Na	me	Midd	fle Name
	Nationality	Caste & Religion			SC/ST	
	Qualifications					Service Busines
	Name of Organisation					
	Business/Office Address					
	Business/Office Address					
	A PARTICULAR OF					
		(office)				
	E-mail Monthly Family Income				Photos	[] is disputable
	Signature (for school record)			_		
	Signature (for school record) Names of Student's Brothe					le standard

Rules and Regulations: (Please read carefully)

- 1. Issue of Admission form is no guarantee for admission.
- 2. Based on the admission procedure and interactions, students are granted admission subject to vacancy. The student must meet the prescribed criteria of age limit and should be medically fit as per the prescribed school standards. Admission will be confirmed only after the submission of the required documents especially original leaving certificate/transfer certificate of previous school. The L.C./T.C. has to be countersigned by the concerned education board in case of change of state or change of Board.
- 3. Fee is to be paid before the 20th day of the starting of the Quarter. A late fee of Rs. 10 per day will be charged thereafter. School is not obliged to give fee reminder. If found that fee is unpaid, the student's name may be deleted from the general register and admission fee will be charged again if the student wants to continue. Fee once paid is neither refundable, nor transferable.
- 4. Having understood that students participate in all activities in house & out bound field trips for educational purposes, as a part of the regular school program. All in house & out bound activities (trips etc.) would be supervised by staff or responsible adults who will exercise all reasonable caution. However, the parents and guardians agree that the school or school board cannot accept responsibility for accidents either at the place of activity or en route.
- 5. Meeting all financial responsibilities with respect to admission of the child in the school and meeting all the eligibility requirements for admission to the standard applied for.
- 6. Adhering to changes, if any, in the standard terms and conditions of the school from time to time, as circumstances may require.
- 7. Accepting that the decision of the school management shall be final and irrevocable.
- 8. Supporting the school in enforcing all its rules, students' dress & behavior code.
- 9. The school reserves the right to revoke the admission / strike the name off the register of a student, on the grounds of a questionable sense of propriety and decorum on the student's or parent's part.
- 10. I have read the school policy & will read the circulars as and when given and abide by them. Also, I will follow the communication channel laid down by the school.

I/We hereby declare that I/We have read the form thoroughly. The information given in the form is authentic and true. I/We agree to abide by the existing rules and regulations as well as the other rules framed thereafter by the authority.

		Parent's/Gu	ardian's Sigr	nature:		
Date : Manageme			nt's Signature :			
		FOR OFFICE US	E ONLY			
				Receipt No		
Admission grante	ed in Std	Board :		in academic year 20 20		
ENCLOSURE:	Photos	☐ Birth Ce	ertificate	Half Year's Report Card		
	Last Year's Atte	ested Report Card	П	ransfer Certificate/Leaving Certificate		
Admission No			G.R. No.	and the bridge of the best of the control of the co		
Signature of			- muci	has a sectional a trackett to valuable		
	Authorised Person		Management			