



The Vatsalya School

ADMISSION FORM

(Class : Pre-primary to X)

1. Name: _____
2. Father's details:
 - a. Father's Name: _____
 - b. Mobile No.: _____
 - c. E-mail ID : _____
 - d. Qualification: _____
 - e. Profession: _____
3. Mother's details:
 - a. Mother's Name: _____
 - b. Mobile No.: _____
 - c. E-mail ID : _____
 - d. Qualification: _____
 - e. Profession: _____
4. Annual Income of the family : _____
5. Landline No.: _____
6. Full mailing address: _____
7. Languages can speak/ read / write: _____
8. Special Aptitude : _____
9. Seeking admission to Class : _____
10. Aadhar Card No. of the student: _____
11. a. Date of Birth: _____ b. Place of Birth: _____
12. Nationality: _____
13. Caste: (SC/ST/OBC/Gen) _____
14. Minority: (Y/N) _____ b. Religion: _____
15. Only Child: (Y/N) _____

16. Previous school attended:

- a. Name: _____
b. Address: _____
c. Medium of instruction: _____

17. Has your child ever repeated a year? If yes, for what reasons: _____

18. Does your child need special education? (Y/N) _____

19. Does your child have any education or history that school should know about (Y/N)
? _____

Brief details (if yes) : _____

20. School bus required: (Y/N): _____

• CONDITIONS AND TERMS OF AGREEMENT

The Vatsalya school reserves the rights to determine the appropriate placement for each student. Applications are accepted for the entire year. No refunds of charges paid nor cancellation of unpaid obligation can be made for any reason.

I have read and understood the conditions and terms of agreement on this application.

Signature:

Date:

Please return completed form to:

The Vatsalya School

S.No. 16 Mauje Wadachiwadi, Undri, Tehsil Haveli, Pune- 411060

Phone No.: +91-9823855304, 8237368385; E-mail: info@ thevatsalyaschool.org

For office use only:

Registration No:

Date of Registration payment:

Paid Rs.

Received by:

Special requirements: