



Aakriti's Angels Academy

(Recognized
By Anglo Indian)

B-53, Vikasipuram Judges Farms, Haldwani, Nainital (UK.)

ADMISSION FORM

Registration No.....

Admission No.....

Please Affix recent stamp size photograph of Mother / Legal Guardian
Signature

Please Affix recent stamp size photograph of Child / Legal Guardian
Signature

Please Affix recent stamp size photograph of Father / Legal Guardian
Signature

Class in which admission is sought for :Session

1. (a) Name of Child in full (In capital Letters) :

(b) Gender : Male ☐ Female ☐

2. (a) Date of Birth (DD/MM/YYYY)

in Words :

(b) Age of Student as on 31st March Year Month Day

3. Blood group of the child Height Weight

4. Do you belong to Gen./SC/ST/OBC/EWS/Disabled / S.G. Child (attach certificate)

Gen. Cat ☐ Sc ☐ ST ☐ OBC ☐ EWS ☐ Disabled ☐ SG Child ☐

5. Details of Parents

Details of Parents	Mother	Father
Name (in Capital Letters)		
Nationality		
Occupation		
Educational Qualification		
Name of the office Full address & Telephone		
Permanent Address		
Annual income (in Rs)		

6. Contact Phone No. (WhatsApp).....Calling.....

7. Name & Address of local guardians (if any).....
.....Phone.....

8. Name & Address of the school last attended with class :
Name :Add.....Class -Ph.....

9. Result of last examinationPercentage.....

10. Whether the transfer certificate is attached Yes/No.....Date of T.C.....

11. Mother tongue..... Home town.....

DECLARATION BY THE PARENTS

I hereby declare that the above information furnished by me is correct to the best of my knowledge & belief. I shall abide by the rules of the school.

Date.....

Signature of Parents (Both)

INFORMATION ABOUT SBLING (S) :

Name	Relation	Class	School Address

DECLLATION :

I HEREBY SOLEMNLY CERTIFY THAT :

1.

I am bonafide guardian of the child.

2.

The information given above is complete, correct and true to the best of my knowledge and belief.

3.

I understand and agree that giving false information, concealing facts and withholding correct information will justify the denial of admission, cancellation of admission or expulsion of my ward.

4.

I have thoroughly gone through the mentioned instructions/School rules and agree to comply with those. I further undertake that my child being admitted to the school will abide by all the school rules.

5.

I have fully understood that fee once paid is neither refundable nor adjustable in any form. All disputes related to school matters will be settled under the jurisdiction of Haldwani only.

6.

The date of birth of the Child given above is as per the Birth Certificate which is produced for verification.
A certified copy is also enclosed.

7.

I will keep the school authorities informed of any change in the mentioned information.

Date.....

Place.....

Signature of Parents / Legal Guardian (Both)

For Office use only

Check List	Particulars of Student
<div><div><input type="checkbox"/> Birth/Transfer certificate, duly signed/counter signed by competent authority.</div><div><input type="checkbox"/> Sibling (I Card, Previous Year's Report Card)</div><div><input type="checkbox"/> Progress Report Card from Previous School</div><div><input type="checkbox"/> Migration certificate (if applicable)</div><div><input type="checkbox"/> Transfer (Proof from employer)</div><div><input type="checkbox"/> Transport Form</div><div><input type="checkbox"/> Admission Fee <input type="checkbox"/> Medical Form, duly completed</div><div><input type="checkbox"/> Residence Proof (Ration Card, Passport, Electricity bill, Voter Card, Aadhaar Card etc.)</div><div><input type="checkbox"/> Blood Group <input type="checkbox"/> Height <input type="checkbox"/> Weight</div></div>	<div><div><input type="checkbox"/> Class.....Sec.....</div><div><div><input type="checkbox"/> Fee Details : Amount _____</div><div>Receipt No. _____</div><div>Checked by : _____</div><div>Signature _____</div><div>Name _____</div><div>Date _____</div></div></div>

ADMISSION SLIP
(For Office Use)

Registration No.....

Admission No.....

Student's Name _____

Date of Birth _____

Class _____

Section Allotted _____

Father's Name _____

Mother's Name _____

Male/Female _____

Date of Admission _____

No. of brothers and sisters _____

House Allotted _____

Nature of admission _____

Aadhaar No _____

Height _____

Weight _____

Blood G. _____

Address _____

Contact No. _____

Contact WhatsApp No. _____