



# RICH HARVEST SCHOOL

Affiliated to CBSE, Aff. No. - 730076

A Unit of SG Dogra Foundation

Ward No. 6, Bari Brahmana, Distt. Samba

Tel. : 01923-222672

## ADMISSION FORM

(All entries should be in capital letters only)

Date of admission \_\_\_\_\_

Admission No : \_\_\_\_\_



The Principal  
Rich Harvest School  
Bari Brahmana  
Distt. Samba

Madam / Sir,

I request for the grant admission of my son / daughter ward to your school from \_\_\_\_\_ (date)  
I solemnly declare that the Date of birth of my ward as given is correct to the best of my knowledge and belief.

Yours faithfully

### PARTICULARS OF MY CHILD

1. Full Name of the student (in block letters) \_\_\_\_\_
2. Gender : Male / Female \_\_\_\_\_ Nationality \_\_\_\_\_ Religion \_\_\_\_\_
3. Date of Birth : Day   Month   Year
4. Age : Year  Month  Day   
(As on 1st July of the relevant session)
5. Whether member of SC/ST/OBC/BWS & DG
6. Adhaar Card no. of the Child \_\_\_\_\_ Adhaar Card no. of the Father \_\_\_\_\_  
Adhaar Card no. of the mother \_\_\_\_\_
7. Last school attended \_\_\_\_\_ 7. Transfer certificate submitted (Yes / No)  
No admission will be regularized until Transfer Certificate (in original) is submitted. In case of first time admission in Pre-Nur, Nursery, Original birth certificate issued by Municipal Corporation is mandatory.)
8. Father's Name : \_\_\_\_\_ Qualification : \_\_\_\_\_  
Organization Name : \_\_\_\_\_ Designation : \_\_\_\_\_  
Contact No. : \_\_\_\_\_ Address : \_\_\_\_\_
9. Mother's Name : \_\_\_\_\_ Qualification : \_\_\_\_\_  
Organization Name : \_\_\_\_\_ Designation : \_\_\_\_\_  
Contact No. : \_\_\_\_\_ Address : \_\_\_\_\_

10. Address Residence : \_\_\_\_\_  
 Tel. Residence : \_\_\_\_\_ Mobile No. \_\_\_\_\_
11. Family Annual Income : \_\_\_\_\_
12. Class to which admission is sought : \_\_\_\_\_ Class Passed : \_\_\_\_\_
13. Languages spoken at home : \_\_\_\_\_
14. Current level of English : New \_\_\_\_\_ Acquaintance \_\_\_\_\_ Confident \_\_\_\_\_
15. Area of interest in which parents can help the school  
 Sports \_\_\_\_\_ Cultural \_\_\_\_\_ Academemics \_\_\_\_\_ Medical \_\_\_\_\_ Other \_\_\_\_\_
16. Is the candidate only child of the parent : Yes / No
17. Reference for contact during emergencies / if other than parents / Guardian :  
 Name of reference : \_\_\_\_\_ Occupation \_\_\_\_\_  
 Address : \_\_\_\_\_ Contact No. \_\_\_\_\_
18. Blood group of the child : \_\_\_\_\_ Allergies if any \_\_\_\_\_  
 Any other ailments \_\_\_\_\_
19. Do you require school transport for the child : Yes./ No

We hereby certify that the information provided by us in this form is correct. We fully understand that the school, on accepting the application form of our ward, is not in any way bound to grant admission. We also accept that the decision of the Principal / School regarding admission will be final and binding on us. We further undertake to abide by the School rules. We also certify that our ward is not physically or mentally challenged and is in good health. No legal case is pending in any court of law in respect of my child's custody.

Signature : Father : \_\_\_\_\_ Mother : \_\_\_\_\_

20. Particulars of Parents / Guardians

Please affix  
 recent colour  
 passport size  
 photograph  
**FATHER**

Please affix  
 recent colour  
 passport size  
 photograph  
**GUARDIAN**

Please affix  
 recent colour  
 passport size  
 photograph  
**MOTHER**

**Note :**

Please submit the following for admission :

1. Attested photocopy of the child's Birth Certificate issued by the relevant municipal corporation.
2. Academic reports of the last class studied in from previous school.
3. Four passport size colour photographs of the child, one colour photograph each of Father and Mother.
4. Admission to a child is confirmed after submission of all relevant documents.

**FOR OFFICE USE ONLY**

Interview / Test on : \_\_\_\_\_ Admission Date : \_\_\_\_\_ Class : \_\_\_\_\_

Fee Deposited on : \_\_\_\_\_ Date : \_\_\_\_\_

Remarks : \_\_\_\_\_

**SIGNATURE OF PRINCIPAL**