ADMISSION FORM



Application No. :

Academic Year :

Location :

Grade Applied for : ______(to be filled by the school)

Please go through the following instructions before filling the form:

- 1. Form should be filled in CAPITAL letters only.
- 2. Please strike off whatever is not applicable.
- 3. Please write full name and grade applied for, behind the photographs being submitted.

Name of the student:					
(Last Name)			(First	Name)	(Middle Name)
D D M M Date of Birth:	Y Y	Y Y			
		Μ	F		
Blood Group:	Gender :			Nationality:	
				·	
Religion:		Caste/S	ub Caste	e:	
(The above information is required by the schoo	I as per the S.	S. Code of k	Karnataka a	nd will be kept confidential)	
			at Coloured		
			ograph		
		(Not mor	e than six าร old)		

Family Information

(Please circle the name of the person to be contacted during an emergency)

	Father	Mother
Surname		
First Name		
Home Address		
Residence Phone No.		
Mobile		
Email		
Occupation		
Designation		
Employee/Self Employed		
Office Address		
Office Phone No. (Land line)		

Guardian details (To be filled in only if child is not staying with parents)		
Name of the Guardian		
Relationship with the child		
Permanent address of the guardian		
Residence Phone No.		
Mobile		
Email		

Sibling informa	tion (If studying at Chry	salis)		
	Sibling	Sibling	Sibling	
Name				
Grade & Sec.				
Gender				
Yes No Mother Father Are the parents separated? If yes, who has custody of the child? If yes, who has custody of the child?				
(Kindly attach the copy of the court order)				
Signature of the	father	Signature of the mother		
Application Ch	eck List:			

Copy of last 2 Year's Report Cards	2 Passport Size Photographs
Copy of School Leaving Certificate (Before joining)	Copy of Birth Certificate
Copy of Passport and visa (in case the student is a foreign passport holder)	
(

Declaration (To be signed by Parent/Guardian)

- 1. I/We have read all the rules mentioned in the Admission Procedure form and after fully understanding the rules, I/we have filled this application form
- .2. I/We declare that my/our son/daughter has not been debarred from studying in any school or appearing in any examination in the previous school.
- 3. The information furnished by me/us in this application is true to the best of our knowledge and belief.
- 4. I/We acknowledge that this application does not automatically admit my/our child to Chrysalis High. The School reserves the right to make a final decision. Any falsified or withholding of information may result in the withdrawal of the student.
- 5. I/We acknowledge that, should this application be accepted, my/our child and I/We (his/her parents or guardians), undertake to abide by the policies and regulations of Chrysalis High and I/We understand that in serious instances of infraction, e.g. damage to school property, bodily harm to another student / teacher, my/our child may be asked to leave the school.
- 6. I/We acknowledge that, upon acceptance, I/We agree to pay the applicable fee and abide by the payment options outlined in the fee Schedule.
- 7. I/We acknowledge that the school will take reasonable care and exercise due diligence within its premises and during school activities and will bear no responsibility should the child exercise any reckless and / or careless behaviour that may endanger his / her safety and others around and as such cause harm or injury to himself / herself and others.

- 8. I/ We acknowledge that the school is not responsible for loss / damage to personal equipment brought to school such as laptop computers, i-pods, mobile phones and play stations.
- 9. I/We declare that all previous medical and psychological histories are correctly reported on the Admission Form.
- 10. On leaving the school, students would return text or any school property they might have borrowed during their stay in the school
- 11. I/We declare that the school holds the right to use the child's photo/video for any publicity material.

Does your child have any medical or pa documentation.	sychological conditions? Please provide details/relevant
Place:	Parent/Guardian Signature
Date:	Relationship with the child
	FOR OFFICE USE ONLY
Admission Status (on Hold/Admitted/Rejected)	Director / Co-ordinator

Receipt No.	
Signature of the Accountant	