



# RAJAM KRISHNAMURTHY PUBLIC SCHOOL

Opp. National College, Dindigul Road, Karumandapam, Tiruchirappalli - 620 001

## Application Form

Admission Sought For

\_\_\_\_\_

Recent  
Passport Size  
Photograph  
(To be Affixed)

Office use only

Admission No :

Date Received :

Child's Surname .....

Child's First Name .....

Date of Birth ..... Age ..... Sex.....

Place of Birth .....

Nationality .....

Mother Tongue .....Other languages known.....

Religion .....Caste.....

Residential Address .....

.....

.....

.....Pin code.....

Residential Telephone .....Mobile.....

Email address .....

Blood Group ..... Aadhar No

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Siblings If any Name (s) .....

School in which Siblings  
are Studying .....



## Parent's Information

Father's Name .....

Age .....

Education .....

Occupation .....

Organisation .....

Work number .....Mobile.....

Email address .....

Mother's Name .....

Age .....

Education .....

Occupation .....

Organisation .....

Work number .....Mobile.....

Email address .....

## Emergency Contact info (other than parents)

Contact Name 1 .....

Relation to Child .....

Phone Number .....

Contact Name 2 .....

Relation to Child .....

Phone Number .....



## Health Information

If you answer “yes” to any of the questions below, please place additional information at the bottom of this form

- Does your child have any allergies? Yes  No
- Is your child under any medication? Yes  No
- Has your child been diagnosed with any special needs?  
(If yes enclose authenticated documents) Yes  No
- Does your child have any conditions such as asthma? Yes  No

## Additional Information

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## Mode of Transport

- Own
- Private
- School Van



## Obligations

These terms and conditions govern the basis on which we agree to provide childcare services to you.

1. Photocopies of all the required documents should be submitted along with duly filled application.
2. Fees will not be refunded at any cost.
3. Inform us of any change in your contact details immediately.
4. Fees must be paid for a term in advance. All payments should be made through cheque / debit card/ credit card/through payment gateway.
5. The name of the child should be mentioned correctly (without spell error) in CAPITAL LETTERS as this will be entered in all the registers..

For all enquiries, Contact: 83000 03976 | Email: rkpstry@gmail.com

## Declaration

I hereby certify that the information given in the admission form is completed and accurate. I understand and agree that misrepresentation or omission of facts will justify the denial of admission, the cancellation of admission or expulsion.

.....  
Signature of Father

.....  
Signature of Mother

Date : .....

Place : .....

For Office use only :

- |  |   |
|--|---|
| <input type="checkbox"/> Birth Certificate   | <input type="checkbox"/> Admission fees           |
| <input type="checkbox"/> Passport Document   | <input type="checkbox"/> Photograph               |
| <input type="checkbox"/> Medical Certificate | <input type="checkbox"/> Other Documents (If any) |
| <input type="checkbox"/> Address Proof       | <input type="checkbox"/> Aadhar card              |

Principal

Date: