



KARAUMBIAH'S ACADEMY FOR LEARNING AND SPORT
Affiliated to CISCE , New Delhi KA-127

ISC ADMISSION & REGISTRATION FORM

Application No:

For the academic year 20__ - 20__

Application for Admission to class:

Boarding Non - Boarding

Please complete each section in **BLOCK LETTERS** using **BLACK** or **BLUE INK ONLY**

For office use only

Roll no _____

DOA _____

Admission Granted

Yes _____

No _____

Provisional _____

SECTION I - CHILD'S PERSONAL DETAILS

1. Full Name.....
(as given in Birth certificate / TC):

2. Sex: Male Female

SATS No.

3. Date of Birth:.....

4. Place of Birth:.....

5. Nationality:.....

6. Mother tongue:.....

7. Aadhaar Card No.:.....

8. Caste.....

9. Father's Name:.....

10. Mother's Name:.....

Address:.....

Address:.....

.....

.....

.....

.....

Occupation:.....

Occupation:.....

Annual Income:.....

Annual Income:.....

Aadhaar Card No.:.....

Aadhaar Card No.:.....

Mobile:.....

Mobile:.....

Phone (R):.....

Phone (R):.....

Phone (O):.....

Phone (O):.....

E-mail:.....

E-mail:.....

Affix recent
passport size photo
of the student

11. State the complete age as on 1st June : 20____: ____Years ____ months

12. Particulars of the Previous School :.....
Affiliated to ICSE / CBSE / SSLC / other boards (Specify) :.....
Medium of Instruction:.....
Particulars of the Examination Passed (enclose copy of marks card)

Examination Passed	Year	Reg. No:

Language & Subject Studied in X Grade	Marks Obtained
Language	
1. English
2. Second Language / Kannada / Hindi / French
Core Subject	
1.
2.
3.
4.
5.
6.
7.
Total Marks.....%	

13. Language & Optional Subject sought in class XI (ISC)

<p>Science Compulsory Subject: English, Physics, Chemistry, Math Optional: Biology <input type="checkbox"/> Computer Science <input type="checkbox"/> Psychology <input type="checkbox"/> Physical Education <input type="checkbox"/></p> <p>Commerce Compulsory Subject: English, Commerce, Economics, Accountancy. Optional: Math <input type="checkbox"/> Computer Science <input type="checkbox"/> Psychology <input type="checkbox"/> Physical Education <input type="checkbox"/></p> <p>Humanities Compulsory Subject: English, Political Science, Psychology, Economics Optional: Physical Education <input type="checkbox"/></p>

14. Details of Sibling:

Name	Age	School/College	Standard/Course

15. Is the student a Non-resident Indian? If so give details:

Passport No..... Date and place of issue.....

Date of Expiry.....

Visa or resident permit details (where applicable, foreign students must have student visa / PIO card / OCI card)

SECTION II - CHILD'S HEALTH

16. a. History /serious illness if any, with dates:.....

b. Present condition.....

c. Physical weakness / allergy that requires special attention :

.....

d. Any other emotional related concerns you would like to share:

.....

.....

.....

SECTION III - TRANSPORTATION (Not applicable for boarders)

17. Transportation: School bus Private

If school bus: Pick up and drop off point..... (the school bus may not ply to all chosen points therefore parents must drop ward/s to the nearest point)

SECTION IV – CHILD'S PREPARATION FOR BOARDING

18. Your child coming to KALS for the first time may face many new demands – having to look after themselves and their belongings , managing their daily routine , studies ,group living , restricted TV , monitored computer related activity ,not eating fast food etc., Would appreciate if you can list some of the ways your child is prepared for a boarding environment.

His/ Her –Aptitudes / Interest / Temperament / personality and Academic Profile:.....

.....

.....

.....

.....

SECTION V – CHILD'S GUARDIAN:

19. Details of Guardian : (boarders only / non boarders if applicable)

Name	Relationship	Address	Contact no & email id (Mobile, Res and Office nos)

Health Card

Name:.....

Sex:..... Date of Birth:..... Blood Group:.....

Address:.....

Phone nos:..... E-mail :.....

Family History of Diabetes, Hypertension, Heart Disease,

Others:.....

Vaccines: 1 2 3

General

Height :..... Weight:.....

ENT

Anemia (mild ,moderate, severe or nil):.....

Skin allergy if any:..... Yes No

Respiratory System:.....

Cardio vascular system:.....

Abdomen:.....

Nervous System:.....

Epilepsy:.....

History of Mental Illness

1. What is your observation on your Childs mental health . _____
2. Has your child received any type of mental health support in the past / present.
Please tick - Counselling, Psychotherapy , Psychiatric services.
3. Has your child been prescribed any Psychiatric medication on the past /present ?
4. Is there any history of mental Illness in the family.

Eyes:

Right:..... Left:.....

Using spectacles specify reasons:.....

Allergic to any Medicine (in history).....

.....

.....

Any Surgery undergone:.....

Important findings:.....

.....

* Document to be submitted for serious health issue

Dental Examination:

i. Extra – oral :.....

ii. Intra – oral:.....

a) Tooth Cavity:..... b) Plaque:.....

c) Gum inflammation:..... d) Stains:.....

e) Tarter:..... f) Bad breath:.....

g) Soft tissue:.....

Dates of preventive inoculation:

1)

2)

3)

Doctor's Remarks:.....

.....

Child Accompanied by: Father Mother Others

Attach Complete Blood Test Report

Date of Examination:

Medical officer's name

Signature with seal

Consent Form

- 1) We have given our consent for our child to take part in the school swimming training programme, others school activities and all other sports related programe. Yes No
- 2) As per the Medical Health report and doctors advice my child will not be able to actively participate in sport activity - (tick if applicable)

I authorize the institution / coaches/ instructor to obtain necessary medical assistance in case of an accident and agree to bear all medical expenses incurred on behalf of my ward/s .

Name of Father / Gurdian _____

Signature of Father / Guardian _____

Name of Mother / Guardian _____

Signature of Mother / Guardian _____

Date:.....

For information of parents:

Non - Refundable Fee

- 1. School Prospectus and Processing fee
- 2. Registration and Admission fee (one time payment at the time of admission only)
- 3. Academic / Tuition Fee - (Excludes uniform, books & stationaries, field trips, study tour, transportation service, External tests / examination / competitions, any school activities, school day, sports day, exhibitions, picnic, music class, counselling and guidance.
- 4. Boarding Fee - Includes Lodging and boarding, Security, care, sports training, Tutoring, Inhouse staff assistance for academic program.

FOR OFFICE USE ONLY

CHECK & ENSURE THE FOLLOWING ARE ATTACHED: Incomplete forms will not be considered. Submission of this form does not guarantee an interview call.

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|--|----------|
| 1. Student recent passport size photos (6nos). | Yes / No |
| 2. Date of Birth Certificate. | Yes / No |
| 3. Marks card of three consecutive years. | Yes / No |
| 4. Transfer certificate (on completion of admission process & before reporting to school). | Yes / No |
| 5. Aadhar card of the student and the parents. | Yes / No |
| 6. Passport size photograph of parents together. | Yes / No |
| 7. Processing Fee Enclosed. | Yes / No |
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