



Goutham Public School

ENGLISH MEDIUM

Recognised by :KSEEB and Govt. of Karnataka

School at :#173, 1st Main Road, Kamalanagar, Bengaluru-560079

Phone : 080-23237174, 23232244 Fax: 080-23237144

E-mail :gouthampublicschool2013@gmail.com Website:gouthampublicschool.org

Application No

Date

(All information must be clearly Hand Written/Typed in Block Letters)

ADMISSION APPLICATION FORM

To

The Head Master/Head Mistress

Passport
Size
Photo

NURSERY

ACADEMIC YEAR

PRIMARY

ADMISSION NO.

HIGH SCHOOL

CLASS

1. Name of the Pupil in full :
(Block Letters)

Sex : M F

2. Present Postal Address :

Mobile Number

3. Date of Birth :

Age:

4. Place of Birth : Village :

Town :

Taluk :.....

District :.....

5. Mother Tongue :

Blood Group:.....

6. Aadhaar Card No. :

7. Nationality :

Religion:.....

Caste :Category:.....

8. Father's Name and Qualification :

9. Mother's Name and Qualification :

10. Father's Occupation :

11. Mother's Occupation :

12. Parent's Annual Income :

13. Guardian Address &Ph.No. :

14. Previous School attended, Period of stay details

Sl.No.	Name of the School attended	Standards Studied with year	Date of leaving School with reasons

15. Name of the School Last Studied :

Medium		Standard	
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16. Submit the following documents at the time of admission:

- a) Birth Certificate
- b) Aadhaar Card copy of both Parents and Child
- c) Transfer Certificate
- d) Caste & Income Certificate
- e) Present Address Proof
- f) Pupil Blood Group Report
- g) Physical Fitness Certificate/Health report
- h) Pass port Size photos 6 copies.

DECLARATION BY THE PARENT/GUARDIAN

I have gone through the particulars filled above and the declaration signed by me. If my ward is admitted in your School, I undertake the responsibility of his/her conduct. I shall be responsible for the payment of all his/her dues if any to the School. I agreed to abide by all the rules and regulation of the School, Board and Management, I am aware of the "Payment of Fees terms and conditions" and have enclosed the signed original document along with this application. I undertake to ensure that my Son/Daughter will not be involved in any kind of ragging or anti-social activities. In case of any involvement, I am aware of the punishment thereof which could be awarded if found guilty.

Place :

Date :

Parent's Signature

PARTICULARS TO BE FILLED BY OFFICE

Admitted to _____ Standard in _____ Mode of Payments of Prescribed fee.

Date of Admission : _____

Academic Year : _____

Admission No. : _____

Receipt No. : _____

Date : _____

Place :

Date :

Signature of
the Chairman/PresidentSignature of
Accountant HeadSignature of
Master/Mistress