



LUCKY INTERNATIONAL SCHOOL

Sector-B Kanti Bhujangani Housing Board (Raj) 342005
Website: www.luckyinternationalschool.org

ADMISSION FORM For Session 20__ - __

For office use
Scholar No. _____

Attach
passport
size photograph

Form No. _____

Admission to Class : _____

Name of the student

(First Name)

(Middle Name)

(Surname)

Date of Birth

D D M M Y Y Y Y

Sex

Nationality

Sex

M

F

(Please tick)

Category

Gen

SC

ST

OBC

Others

Languages Spoken : _____

Co-curricular

Interests of the student : _____

PARENT'S INFORMATION

Name of the Mother : _____

Educational Qualification : _____

Occupation & Designation : _____

Annual Income : _____

Office Name & Address : _____

Office Contact (Landline) : _____ Mobile Number _____

Email id (if any) : _____

Any particular area in which the mother would like to be of assistance to the school/class/ students:

Name of the Father : _____

Educational Qualification : _____

Occupation & Designation : _____

Annual Income : _____

Office Name & Address : _____

Office Contact (Landline) : _____ Mobile Number : _____

Email id (if any) : _____

Residential Address : _____

Contact Number : _____

Permanent Address : _____

Contact Number : _____

Name of the Guardian : _____

Educational Qualification : _____

Occupation & Designation : _____

Annual Income : _____

Office Name & Address : _____

Office Contact (Landline) : _____ Mobile Number : _____

Email id (if any) : _____

In Case of Emergency kindly contact:

Person's name : _____ Contact Number : _____

Relation with the student : _____

STUDENT RELATED IMPORTANT INFORMATION

Name of the School last attended: _____

Class Last Attended in figure: _____ (in words) _____

Does the child have any special need/s? Yes No

If Yes, give details: _____

Kindly affix photographs below (as applicable) and insert signatures



Mother



Father



Guardian

Date: _____

Signature of Parent/Guardian: _____

FOR OFFICE USE ONLY**CHECKLIST**

- Duly filled Registration Form.
- Three recent passport size photographs.
- Copy of the Birth Certificate.
- Transfer/ Migration Certificate in original (as and when acquired).
- Copy of mark sheet/report card of the previous class.(as and when acquired).
- Attested copy of caste / tribe / class certificates issued by competent authority.
- Transport Form
- Medical Card

Registration No. _____ Date : _____

Admission Granted to Class _____

Scholar No. _____ Date : _____

House _____

Authorized Signatory : _____ Principal : _____