



<input type="checkbox"/>	SIBLING INTSRs		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Aravali	VV	DLF, Ph-III	
<input type="checkbox"/>	STAFF WARD	<input type="checkbox"/>	ALUMNI WARD
<input type="checkbox"/>	Ex TSRS STUDENT		

THE SHRI RAM SCHOOL

APPLICATION FORM FOR ICSE CURRICULUM

Academic Session 2024-25

R. No. :

Parents are requested to note that

- This is not an Admission Form, nor does the submission of this Form entitle any child automatic admission to the School.
- Any pressure or recommendation that is brought to bear on the school authorities will automatically disqualify this application.
- Once selected child may be placed in either Aravali / Mousari Campus.

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PHOTOGRAPH
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1. Name of the child : _____ Sex : M F Others

2. Nationality : _____

3. Date of Birth : _____

4. a. Class to which admission is sought: _____

b. School and class last attended : _____
(Please specify the Board)

5. 3rd Language (applicable only for classes VI - VIII) _____

6. **Details of Parents:**

Marital Status : Married Divorced Separated Widowed

7.

Mother:

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Father:

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HERE

Name : _____

Date of Birth : _____

Qualification : _____

Mobile No. : _____

email : _____

Name : _____

Date of Birth : _____

Qualification : _____

Mobile No. : _____

email : _____

Mother:
Please specify the following:

Occupation : _____

Designation : _____

Name of Organization: _____

Office address : _____
(if applicable)

Father:
Please specify the following:

Occupation : _____

Designation : _____

Name of Organization: _____

Office address : _____
(if applicable)

8. Residential Address : _____

9. Residential Phone No.(s) : _____ Pin Code _____

10. a. Emergency No. (s) : _____

b. E-mail : _____

11. Details of sisters and brothers in chronological order including the applicant.

	Name	Age	M/F	School	Class/Sec.
a.	_____	_____	_____	_____	_____
b.	_____	_____	_____	_____	_____
c.	_____	_____	_____	_____	_____

12. a. If the child is adopted, please tick box:

b. If the child has any special needs, please tick box:

c. have you applied to The Shri Ram School, Vasant Vihar, Moulisari Campus, Ph-III / Aravali, Ph-IV prior to this application: _____

(If yes, please give details) _____

This is to certify that the facts given by me on the application form are true. I understand that if any part of it is found to be false, this application will be cancelled. I also accept that filling the application form does not ensure a meeting with the Director and Staff.

Date : _____

Signature of Mother/Father/Guardian

Please note the following:

- This form must be accompanied by:
 - One photocopy of the original Municipal Birth Certificate.
 - One recent passport size photograph of the child pasted in the space provided.
 - Proof of Residence of the Parent** : A Photocopy of the Electoral Card/Passport/Driving Licence/Telephone Bill Lease Agreement /Aadhaar Card.
 - Photocopy of the Aadhaar Card of the child if applying to Senior School ((VI to XII).
 - Copy of adoption deed in case the child is adopted.
- Please do not attach any other annexures.
- Medical information document in case the child has any special needs.
- All bus routes will be at the discretion of the school authorities. The school may discontinue or change the bus service to any area if there are sufficient reasons for this.
- Parent are expected to come for bus duty.

