## G D Goenka International School

Name......Admission No.:

Application Form

APPLICATION FORM

Important: Please answer all questions and print the information clearly in BOLD, using black or blue pen.

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stated		ROTHER		Mark
GENERAL INFOR	MATION	Signature of Mother	The state of	Signature of Fath
I/ We are considering e	enrolment in Grade/ Class	with effe	ect from mont	h/ year.
Have you ever applied for	admission at G. D. Goenka Schools	YES NO		
If YES, when? Academic Y	ear for which Class			
PERSONAL DATA	A OF STUDENT			
Surname	First Na	me	Middle Name	
Date of Birth	Age as on 1st April, 20	_: Years Mo	nths Nationality	
Sex Female M	tale Mother Tongue	Languag	es spoken at home	
Permanent Address				
City	Pin Code	Country	Email address	
Home Tele# S1D/ISD Co	de Mob#		Emergency Contact No.	
Mailing Address if differe	ent			
HEALTH INFORM	MATION			
Allergy/ Chronic ailmen	at it any	Physical h	andicap/ disability # arry	
Any other health problem				
EDUCATIONAL E	BACKGROUND	MARK NOOF		
Name(s) of previous a	and present School(s) attended			
City/State	Country	rom To	Reason for leaving	
Has the child ever be	en Expelled/Rusticated/Not prom	oted to next class by any Sch	nool? YES NO	
If YES, Please give deta	ils:			

ther's/ Guardian's Name	Age	Nationality	Education/University	
other's Name	Age	Nationality	Education/University	
lelationship with Child 50 case	of Guardian Are	parents living together Yes	No No	
ROFESSION/OCCUPATIO	N			
Father's/ Guardian's Profession/Occu	pation		Annual Gross income	
Off. Address				
Telephone F	Fax	Mob#	E-mail	
Mother's Profession/Occupation			Annual Gross income	
Off. Address				
Telephone	Fax [	Mob#  Age School	E-mail E-mail attending/attended	
OTHER RELATIVES INFO	EL PERM	Age School		181
OTHER RELATIVES INFO  Real Brother/ sister 1.Name	RMATION	Age School	all attending/attended	
OTHER RELATIVES INFO  Real Brother/ sister 1.Name  Real Brother/ sister 2.Name	RMATION	Age School	all attending/attended	
OTHER RELATIVES INFO  Real Brother/ sister 1.Name  Real Brother/ sister 2.Name  Relatives who are studying/have st	RMATION udled in the G. D. Goenka	Age Schools	ol attending/attended	
OTHER RELATIVES INFO  Real Brother/ sister 1.Name  Real Brother/ sister 2.Name  Relatives who are studying/have st  Name  REFERENCES	RMATION  udled in the G. D. Goenka	Age School  Age School  School  Year of Joining	al attending/attended  al attending/attended  Relationship	
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Name	No
Class	

## Please attach following documents with this form:

- 1. Attested copy of birth certificate.
- 2. For Class II and above, previous 3 years report cards.
- 3. For Class II and above, Transfer Certificate to be produced at the time of admission. In case of Inter-state students, the Transfer Certificate should be counter signed by the education officer.
- 4. Visiting/Business Cards of parents.
- 5. Passport size photographs (1 each of student and both parents guardian)

## DECLARATION / UNDERTAKING

This form is intended to furnish information about the student and his her family, without obligation on either side.

// We understand that:

If we wish to proceed further all entries in the Application Form must be completed.

I/We certify that the information furnished in this form is true to the best of my/our knowledge and belief.

Signature of Parenti Guardian

Date

Place

## For Office Use Only

Date of enquiry.

Remarks

