



ADMISSION FORM

Petals School

**Latest Passport
Size Photograph**

Application No:

Academic Year:

Grade Applied For:

(To be filled by school)

Please go through the following instructions before filling the form:

- Form should be filled in CAPITAL letters only
- Please write full name and grade applied for, behind the photographs being submitted

Name of the student : _____

Date of Birth: _____

Blood Group: _____ Gender _____ Nationality _____

Religion: _____ Caste/Sub Caste: _____

(The above information is required by the school as per the S.S.Code of Karnataka & will be kept confidential)

Family Information

	Father	Mother
Surname		
Name		
Address		
Residence Phone No		
Mobile No		
Email		
Occupation(Company Name)		
Office Address		
Office Phone No		

Guardian Details

(To be filled only if Child is not staying with parents)

Name of the Guardian	
Relationship with the child	
Permanent address of the Guardian	
Residence Phone No	
Mobile No	
Email	

Are the parents separated? Yes/No, who has custody of the child? Mother/Father

(Kindly attach the copy of the court order)

Signature of the father _____ Signature of the Mother _____

Declaration (To be signed by Parent /Guardian)

1. I/We have read all the rules mentioned in the Admission Procedure form and after fully understanding the rules, I/We have filled this application form.
2. I/We declare that my/our son/daughter has not been debarred from studying in any school or appearing in any examination in the previous school.
3. The information furnished by me/us in this application is true to the best of our knowledge and belief.
4. I/We acknowledge that this application does not automatically admit my/our child to Petals International School. The school reserves the right to make a final decision. Any falsified or withholding of information may result in the withdrawal of the student.
5. I/We acknowledge that, should this application be accepted, my/our child and I/We (his/her parents or guardians), undertake to abide by the policies and regulations of Petals International School and I/We understand that in serious instance of infraction, e.g. damaged to school property, bodily harm to another student /teacher, my/our child may be asked to leave the school.
6. I/We acknowledge that, upon acceptance, I/We agree to pay applicable fee and abide by the payment options outline in the fee schedule. Fee once paid is neither refundable nor transferable.
7. I/We acknowledge that the school will take reasonable care and exercise due diligence within its premises and during school activities and will bear no responsibility should the child exercise any reckless and or careless behavior that may endanger his/her safety and others around and as such cause harm or injury to himself or herself and others.
8. I/We acknowledge that the school is not responsible for loss/damage to personal equipment brought to school such as laptop computers,i-pods,mobile phones and play stations.
9. I/We acknowledge that all previous medical and psychological histories are correctly reported on the Admission Form.
10. On leaving the school, students would return text or any school properly they might have borrowed during their stay in the school.
11. I/We declare that the school holds the right to use the child's photo/video for any material.

Does your child have any medical or psychological conditions? Please provide details/relevant documentation

Place: _____ Parent /Guardian Signature _____

Date: _____ Relationship with the child _____

Application Check List:

Copy of the last 2Year's Report Cards	2 Passport Size Photographs
Copy of school Leaving Certificate (Before Joining)	Copy of Birth Certificate
Copy of Passport and Visa (in case the student is a foreign passport holder)	

Fee Payment Receipt

First Term Fee	
Fee received Rs. _____	Receipt No. _____
Date: _____	Signature of the Accountant _____

Second term Fee	
Fee received Rs. _____	Receipt No. _____
Date: _____	Signature of the Accountant _____

Third term Fee	
Fee received Rs. _____	Receipt No. _____
Date: _____	Signature of the Accountant _____

FOR OFFICE USE ONLY	
Admission Status c (On Hold/Admitted/Rejected)	Trustee/Principal