

ATMIYA VIDYALAY

EDUCATING MIND & HEART

Managed By: Yogi Divine Society, Haridham, Sokhada

Beside Atmiyadham, Nr. Avadhoot Railway Crossing, Manjalpur, Vadodara-11. Tel.: +91 07575011886

FORM NO.		Admission form for academic year 2018-20	
FOR OFFICE USE ON	LY:		
Application Form No. :		Date of Admis	sion:
Academic Year :	2018 - 2019	Class in which the child	is admitted :
Authorized Signature	e:		
STUDENT'S DETAILS :		λ.	
Name of Student:	Kushal	<u>Ashit</u>	5hah
	Name	Father's Name	Surname
lass in which the admis	sion sought:		
Whether the Student wa	ants to avail Hostel acco	ommodation : Pl. : ✓ YES NO	
Name and Address of th	ne previous school atten	ded: AMBE VIDYALE	24.24
		HIMBE VI DYALF	TY IVIANJALPOR
Student's Birth Date:		98	
Place of Birth : Pun	JE	Mother Tongue :	GUJARATI
nge: 11 year	-Sex:	lale Religion: HIN	DU Cast: JAIN
Aadhar No: <u>3456</u>	89 789 234 N	lationality: TNDIAN	Sub Cast :
Blood Group: 0 +	ve		
PL MENTION: (Pl. and an arrangement of the child be arra		document for the same at the time of a	dmission)
SC	ST	Baxipunch	Other
2) Whether the student	is staying with : Both Pa	arents () / With Mother (.) / With Father (
		arents () / With Mother (.	
	single parent than prov		the era to the contract of the
If staying with	single parent than prov		190 PM - 190
BANK DETAILS OF PA	single parent than prov	ide reason : SAUINGS Type of Account	
BANK DETAILS OF PA	ARENT : No.	SAVINGS	RAG PURA

Address for correspondence: 130, Sarang Society A-206 2nd Floor. Area: Manjalput City: Vadodara Pin code: 39011 State: Gujarat Country: India Contact Detail: E-mail: ashit yahoo Mail.com Landline No.: 0265-323536 Mobile No.: 1) 9823006432 2)
FAMILY DETAILS:
1. Father's Name: Ashit Middle Name: Pravinchendra Surname: Shah Mobile No.: 965 34 00032 Father's Education / Qualification: MBA Father's Occupation: Area Vice President Annual Income: Signature of Father: Ashit
2. Mother's Name: Sheetal Middle Name: Ashit Surname: Shah
Mobile No.: 7065432124 Mother's Education / Qualification: BHSc. ECCE S Signature of Mother:
3. Guardian's Name: Tyotsnaben Middle Name: Pravinchandra Surname: 5hah Mobile No.: 8034563421
Signature of Guardian:

STUDENT'S MEDICAL HISTORY: Please mention whether the child is suffering from 1. Any disease: NO 2. Any organ deformity : No Pl provide Medical Fitness Certificate of the child from recognaised doctor.

PARENT'S DECLARATION:

We declare that:

- The information furnished in this application form is true and correct to best of our knowledge.
- We shall abide by the rules & regulations laid by the school management in force now or introduced in future.
- We shall not held the school authorities and Management responsible for any damage, sickness, accident, death caused to my ward during his stay in the school, Hostel on account of any mishappening or any untoward incidents that may be cost inadvertently to my ward.
- We undertake to meet all financial responsibilities in time regarding the study of our child in the school.
- We have not hidden or wrongly interpreted any information in this Admission Form.
- We are aware that all kinds of fees, once paid, are not refundable or transferable under any circumstances.
- In case of violation of school rules and regulations, the management holds the power to cancel the admission.
- All disputes are subject to the jurisdiction of Vadodara District Court of Gujarat State of INDIA.

Place: Vadodara

Student's Sign with date: KAS 30 1 18

Guardian's Sign with date: TPS 30 1 18

Father's Sign with date:

Mother's Sign with date:

SUBMISSION: PI submit the following documents at the time of filling admission form:

- Passport size Photographs 2 copies of each Father, Mother, Guardian & Child.
- Copy of Marksheet.
- Copy of Birth Certificate, Aadhar Card, Bank details a/c. no.
- Copy of Medical Fitness Certificate from recognized doctor.
- Copy of Conduct Certificate from the presents School.
- Copy of School Leaving Certificate.

FOR NURSERY & KG SECTION:

- · Copy of Aadhar Card of Student. (For KG Student)
- Copy of Aadhar Card of Father & Mother. (For Nursery Students)
 Copy of Birth Certificate of Child.

SUBMISSION: PI submit the following documents at the time admission:

- Medical Fitness Certificate from recognized doctor.
- School Leaving Certificate of the presents School Attended (Original)
- Marksheet of the Final Exam (Original)
- Conduct Certificate from the presents School