

Sky Lark International School BARWALA (HISAR)

Application Form

APPLICATION FORM

Important: Please fill all columns and write the information clearly in BOLD using black or blue pen.

Please affix latest Passport size photograph in colour Please paste photograph. DQ NOT STAPLE STUDENT	Please affix latest Passport size photograph in colour MOTHER	Please paste photograph DO NOT STAPLE	Please affix latest Passport size photograph in colour FATHER	
	Signature of Mother	_	Signature of Father	
PERSONAL DATA OF STUDENT				
First Name Middle Name		Surname		
Date of Birth Age on 1st April, 20	_; Years Mor	nths Nationality		
Sex : Female Male Mother Tongue	Langua	ages spoken at home		
Permanent Address				
City Pin Code	Country	Email address		
Home Tele# Mob#		Emergency Contact No.		
Mailing Address if different				
HEALTH INFORMATION				
Allergy/Chronic ailment if any	Physical h	nandicap / disability if any		
Blood Group Any other health problem				
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EDUCATIONAL BACKGROUND		X		
Name (s) of previous and present School(s) attend	ded			
City/State Country From	то	Reason for leaving		
Has the child ever been Expelled/Rusticated/Not promoted to next class by any school? Yes No				
If YES, Please give details :				

PARENTS/GUARDIAN'S INFORMATION
Father's/Guardian's Name Age Nationality Education
Mother's Name Age Nationality Education
Relationship with child (in case of Guardian)
PROFESSION/OCCUPATION TO THE PROFESSION TO THE P
Father's/Guardian's Profession/Occupation Annual Gross income
Off. Address
Telephone Fax Mob# E-mail
Mother's/Guardian's Profession/Occupation Annual Gross income
Off. Address
Telephone Fax Mob# E-mail
OTHER RELATIVES INFORMATION
Real Brother/sister 1. Name Age School attending/attended
Real Brother/sister 2. Name Age School attending/attended
Relatives who are studying/have studied in the Skylark International School
Name Class Year of Joining Realationship
REFERENCES
Name Designation Telephone
Address City/State Pin Code
Name Designation Telephone
Address City/State Pin Code
TRANSPORT
School Bus Facility Yes No Pick & Drop Area

Name		
Class		

18/8/01	-11
NO.	- 1
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Please attach following documents with this form:

- Attested copy of birth certificate.
- 2. For Class II and above, previous 3 years report cards.
- 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.
- 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.

I/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	-4	Daniel	1000	immedia	ä
Signature	C 3.T	PALMI	13.72	Lett Che	a

Date

Place

For Office Use Only

Date of enquiry :

Remarks

SKY LARK INTERNATIONAL SCHOOL

CBSE Affiliated, An English Medium Co-Educational Senior Secondary School
An Air Conditioned Premier School
Just 2nd KM Stone, Jind Road, Barwala (Hisar)

