



**BRIGHTWAYS  
INTERNATIONAL SCHOOL**

Matindu Road, Kharkhoda, Sonipat-131402 | Tel.: 7082005101, 7082005102  
E-mail: brightwayskharkhoda@gmail.com

Photograph of the Father	Photograph of the Mother	Two copies of the photograph of the child
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**601**

**ADMISSION FORM**

Session 20..... - 20.....

Class: .....

Admn. No. : .....

1. Name of the student(Block Letters) \_\_\_\_\_

2. Gender \_\_\_\_\_

3. Date of Birth (in figure) Date   Month   Year

4. Religion \_\_\_\_\_

5. Whether belongs to SC/ST/Backward Category (Attach Certificate) \_\_\_\_\_

6. Residential Address \_\_\_\_\_

7. Is school transport required?  Yes  No

8. Does the child have any special need?  Yes  No

9. Mention the name & class (if any) of real brother/sister of the applicant studying in the school

Name \_\_\_\_\_ Class \_\_\_\_\_ Sec \_\_\_\_\_

10.

Details of Parents	Father	Mother
Name		
Age		
Profession		
Designation		
Address(official)		
Telephone No.	Res: Mobile: Office:	Res: Mobile: Office:
Email ID		

11. The following documents are to be enclosed:
- a) Date of Birth Certificate(original issued by Corporation/Municipal Corporation)
  - b) Proof of Residential Address
  - c) Proof of Child's Special Need (if applicable, from a Registered Medical Practitioner/ Counsellor)
  - d) Parent's ID (Photocopy)
  - e) TC in original ( if applicable)
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## Declaration

I/We, hereby certify that the information given above is correct to the best of my knowledge.

I/we understand that in case of any information is found to be misleading or false, shortlisting for registration/ admission of my ward may be cancelled without any correspondence in this regard.

I/we agree that the application/registration/shortlisting does not guarantee admission of my ward.

I/we accept the admission procedure of the school and the decision taken by the school authorities will be binding on me.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Signature of Headmistress