Sri Adichunchanagiri Shikshana Trust (R)



# SRI ADICHUNCHANAGIRI CENTRAL SCHOOL Adichunchanagiri Road, Kuvempunagar, Mysuru-570023

Pł S.A.C.C.S.	n 0821-2461869, E-mail: saccentralschool @gmail.com  Website : www.bgscentralschool.org			
	Affiliated to CBSE, Delhi, Affln No: 830296			
Application No :	Date of Admission: 2 0 Receipt No			
Admission No: STS No: STS No:				
APPLICATION FOR ADMISSON TO FOR THE ACADEMIC YEAR 20 to 20				
ADMISSION DETAILS				
1. Admission to Class	Pre-KG LKG UKG I II III IV V VI VII VIII IX X			
2. Type of Admission	Management RTE 3. Semester: SEM - 1 SEM - 2			
4. Medium of Instruction	ENGLISH 4 b) Hostel Facility: YES NO			
5. Mother Tongue	Kannada Hindi Urdu Marathi Tamil Telugu Malayalam Other			
5 a) Languages	Language English   Il Language Kannada   III Language Hindi			
PREVIOUS SCHOOL DETAILS (If Applicable)				
6. Previous School Affiliation	STATE CBSE ICSE Others			
7. Transfer Certificate No. & Date				
8. Previous School Type	Govenrment School Private Aided School Private Unaided School Local Bodies			
9. Previous School Name				
10. Previous School Address	11. City / Town / Village			
	12. Taluk			
	14. Pin Code			
	13. District			
STUDENT'S DETAILS				
15. Name of the Student				
16. Name of the Father				
	Qualification Occupation			
17. Name of the Mother				
	Qualification Occupation			
18. a) Student's Aahdaar Number				

b) Father's Aahdaar Number	
c) Mother's Aahdaar Number	
19. Date of Birth and Age	
	In Words Age
20. Age Proof	Birth Certificate Transfer Certificate 21) Gender Boy Girl
22. Religion	Hindu Muslim Christian Sikh Buddhist Parsi Jain Others
23. a) Student Caste	
b) Student 's Caste Certificate No.	R D 0 0
24. a)Father's Caste	Annual Income
b) Father's Caste Certificate No.	R D 0 0
25. a) Mother's Caste	Annual Income
b) Mother's Caste Certificate No.	R D 0 0
26. Social Group	SC ST Cat 1 II A III B III A III B General
27. Belongs to BPL	YES NO BPL Card No
28. Bhagyalakshmi Bond No.	
29. Student's / Parent's Bank A/c. Details	Bank
	A/c No.
	IFSC Code
30. Diability Child (Tick your Choice)	Not Applicable
31. Special Category	Destitute HIV Case Orphans None Others

STUDENT'S CONTACT DETAILS				
32. Address				
	PIN PIN			
33. Student's Mobile Number				
b) Email				
34. Father's Mobile Number				
b) Email				
35. Mother's Mobile Number				
b) Email				

### Note:

- Fill this form in Capital letters only.
- \* All the columns are compulsory.
- Parents/ Guardians are required to kindly go through the condition laid by the school before they fill in their applications for registrations of students and are required to strictly abide by all the terms and conditions stipulated by the school from time to time.
- ❖ MARK Y or N where ever applicable

### **CHECK LIST OF DOCUMENTS ENCLOUSER**

- ➤ BIRTH CERTIFICATE. (Original)
- > TRANSFER CERTIFICATE. (Original)
- > AADHAAR CARDS (Photo Copy of Candidate, Father & Mother)
- ➤ CASTE CERTIFICATE OF CANDIDATE. (Photo Copy)
- ➤ INCOME CERTIFICATE. (Photo Copy, if applicable)
- > PROGRESS REPORT (Photo Copy of previous year)
- > PASSPORT SIZE : 5 NO. OF PHOTOS.
- > PHOTO COPY OF PASS BOOK FRONT SHEET (In the name of Student / Parents)

# **DECLARATION BY STUDENT & PARENT/GUARDIAN**

## (KINDLY READ THE FOLLOWING INFORMATION BEFORE YOU SIGN)

I do hereby undertake that I have filled up this form myself, best of my Knowledge & belief the particulars furnishes above are true. I also abide by all rules & regulations of the esteemed institution. I am aware that the management has the full authority to expel me for negligence in studies, misbehavior and continuous failure. I will not indulge in any act of ragging. I do undertake that I shall pay all the fees & dues to the institution promptly on demand. I will send my ward to on time I agree to abide by the school timings and will not take my ward from the school during the school working hours. I hereby agree to settle any of the legal disputes in Mysore Court Jurisdiction only.

Signature of Student	Signature of Parent
(Name in Block Letters)	(Name in Block Letters)

## FOR OFFICE USE ONLY

Application Received on	Admitted to
2 0	Class
Checked & Verify by	Admission Receipt Number
Data Entry Operator Name & Signature	AccountantSignature

Principal Sri Adichunchanagiri Central School Kuvempunagar, Mysuru-23 Ph : 0821-2461869