**Bharatiya Vidya Bhavan’s Public School**

Latest

Passport size Photo of Father,

self attested

**(Vidyashram)**

Latest Passport size Photo of Child

**JUBILEE HILLS, HYDERABAD – 500 096**

**APPLICATION FORM**

Latest Passport size Photo of Mother, self attested

**FOR CLASS I – 2023-24**

Admission No…………… Regn.No:\_\_\_\_\_\_\_\_\_\_

1. Name of the Student as per the birth certificate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(in block letters)

Date Month Year

2. Date of birth (in figures) : Place of birth……

( DOB in words) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Age at the time of admission : \_\_\_\_Yrs \_\_\_\_ Month(s) \_\_\_\_days Sex: M F

as on 31-May 2023

4. Family details **FATHER MOTHER**

(in BLOCK LETTERS)

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*(**should be strictly in accordance with the date of birth certificate of the child)**

Qualification(s) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Monthly income : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

e.mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Res.Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel.No.Res\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel.No.Off. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nationality : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Religion:…………………..

(In case of a child having foreign citizenship, should produce a copy of valid VISA for the period of

their study in the school)

Religion : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Community (enclose a certified/Xerox copy: SC BC ST OC

of the supporting document)

6. Mother tongue of the pupil : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Identification marks : 1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8 a) Name and class of brother/sister (own): 1)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Class:\_\_\_\_\_\_\_Sec\_\_\_\_\_

Studying in this school (Not Cousins)

2)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Class\_\_\_\_\_\_\_Sec\_\_\_\_\_

b) In case, parent is ex-student : Kindly enclose the study certificate : Yes/No

9. I/We am/are legally guardians of Kum/Mast:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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10. 2nd Language opted in Class I: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Hindi/Telugu)

11. Name & address of the guardian

(if the child is not staying with

parents) and relationship : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

12. Are you the Member of

Jubilee Hills Co-Operative House Building Society Ltd.

If yes, (a) indicate the membership No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ b) plot No.\_\_\_\_\_\_\_\_ Road No.\_\_\_\_\_

13. The Registration fee of Rs.500/- is paid herewith

1. **I understand that -**
2. **admission is not guaranteed merely on registration of this application and that the school Management’s decision is final and binding on me.**
3. If any applicant registers more than one application for a child, all the applications will be

rejected by the School Management.

1. **I certify that the information given above is correct. If my ward is admitted into the school, I shall be responsible for the regular payment of fees and other dues of my ward as per the rules laid down by the school from time to time.**
2. **We agree that the school reserves the right to change at any time the structure of fees or any rules and regulations concerning the school, such changes will be binding on us.**
3. Refund of fees paid by the parents will be regulated according to the terms and conditions mentioned in the prospectus.
4. **Any change of address will immediately be notified to the school.**

Date: Signature of Mother Signature of Father

Place: (NAME IN BLOCK LETTERS) (NAME IN BLOCK LETTERS)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Encl:**

1. **Certified Xerox copy of date of Birth Certificate.(At the time of registration, original should be submitted for verification)**
2. **Copy of any valid document indicating the place of residence as given in the application.**
3. **Copy of relevant document (study/Transfer Certificate) regarding their studies in the school in respect of parents who are ex-students.**
4. **If the application is submitted mentioning a reference to the Membership of Jubilee Hills House Building Co.Operative Society Ltd., attested Xerox copies of the Membership in proof may be furnished.**
5. **In case of a child having foreign citizenship, should produce a copy of valid VISA for the period of their study in the school.**
6. **Copy of Bonafide, Certificate, in case of sibling students, studying in this school.**
7. **Copy of Aadhar Card (student)**

**Verified by**

**FOR OFFICE USE**

Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Receipt No.\_\_\_\_\_\_\_\_\_\_\_\_\_dated\_\_\_\_\_\_\_\_\_\_\_ for Regn.No.\_\_\_\_\_\_\_\_\_\_\_\_

Initials of Accounts Dept. Counter Signature of the

Principal