

THE POLARIS INTERNATIONAL SCHOOL

Managed by Srinidhi Education Trust ®
Affiliated to CBSE, New Delhi - Affiliation No. 831124

Pethanahalli, Hosakote, Bengaluru - 562 114

Email: admin@tpis.in, info@tpis.in Website: www.tpis.in

Mobile: 8884007627, 8884008627

APPLICATION FORM

Grade :		Passport Size Student's				
Academic Year:		Photograph				
Admission No.: SATS No						
	~					
 The form should be filled in CAPITAL letters only. Overwriting should be avoided. The application form must be filled completely and correctly. The application must be submitted to the admission authority on or before the last date of accepting forms. Affix Passport size Photograph - child, father, mother and guardian. Submit the following along with the completed form : 						
i) Photocopy of Birth Certificate						
 ii) Photocopy of Report Card (last 3 years) iii) Photocopy of Caste Certificate and Aadhar Card iv) Original School Leaving / Transfer Certificate (Primary & Secondary) / Bonafide Certificate (Pre-Primary) Note: Original of (6) i, ii & iii to be shown at the time of admission of the student 						
The Principal, We request you to kindly consider our application for admit your school. We submit herewith all the necessary details.	ssion of our son / daughter to the above i	mentioned grade in				
1) Name :						
2) Gender:	IID No. (Aadhaar No.) In words:					
5) Nationality:	6) Religion :					
7) Caste of Candidate :	8) Sub - Caste, if any :					
9) Whether belongs to SC/ST/Cat-I/II/III/General/Minority/Others :						
10) Mother Tongue :	11) Last School Attended					
12) Class last attended :	13) Subjects Studied :					

	à.	
		Passport Size
Tel : Resi :	Mobile :	Mother's
Email :		Photograph .
Qualification :	Occupation :	
Designation :	Name of the Organization (if applicable)	
Address of Business/Organization:	·	
Father's Name:		
Tel : Resi :	Mobile :	
Email :		Photograph
Qualification :	Occupation :	
Designation :	Name of the Organization (if applicable)	
Address of Business/Organization	: <u></u>	
Residential Address :		
Permanent Address :		
Name of the Local Guardian :		Passport Size
Relationship with the Child:		Guardian`s Photograph
Address:		
Tel : Residence :	Mobile :	

Email:

If Parent is not immediately available, contact:					
Friend's or Relative's Name :			Contact No		
Family Physician's Name :			Contact No		
Hospital:			Contact No		
Student Blood Group :					
Any Chronic Ailments being treated for :					
			~		
Siblings Details :					
Name		nder	School	Grade	
	M	F			
				2	
	-	_			
Annual Income of Parents :					
Is School Transport Facility required :					
We Mrs		and	d Mr	parents of	
Vum / Master			do homely declare that the above info	mantion airea	
Kum / Masterdo hereby declare that the above information given by us is true to the best of our knowledge and we will be personally responsible for his / her discipline and we will abide by the following rules and regulations of the School 1. The Student should be punctual to the school.					
 Any absence should be supported by a The student must have a minimum of 8 Uniform is compulsory. The student m 	leave 35% at	letter tendar	nce for taking the examination.		
5. Fees is payable for all the 12 months.6. Progress cards are sent periodically.					
7. For any complaint, parents are requeste8. Fees once paid will not be refunded in					
Place:		D	ate :		
Signature of Father : Signature of Mother :					

Signature of Guardian :_

Sl. No.	Particulars				Remarks
1	Photocopy of report card (last years)	Yes	No	NA	
2	Original School Leaving/Transfer Certificate (Primary/Secondary) Bonafide Certiticate (Pre-Primary)	Yes	No	NA	
Date :	Scrutinized by : Signature :				
					Per,
To be	submitted along with the admission form				
Sl. No.	Particulars				Remarks
1	Birth Certificate	Yes	No	NA	
2	Caste Certificate	Yes	No	NA	
3	Aadhar Card	Yes	No	NA	
Date:	Scrutinized by:				Signature :
Adn	nission No. :			Date :	
Rec	eipt No.:				
Date:					
Admit Yes/No					
Reject Reason					
On Hold Reason					