

S. No. \_\_\_\_\_

Empowering  
students to  
**achieve** their  
full **potential**



## REGISTRATION FORM



**ADMISSION INTO CLASS : \_\_\_\_\_**

Pupil's Surname: \_\_\_\_\_ Boy or Girl: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Proposed Date of Entry: \_\_\_\_\_ Nationality: \_\_\_\_\_

Boarding or Day Entry: \_\_\_\_\_ Passport No.: \_\_\_\_\_

II Language: \_\_\_\_\_ III Language: \_\_\_\_\_

Pupil's Home Address: \_\_\_\_\_  
\_\_\_\_\_

Father's Full Name, Title / Surname and Address: \_\_\_\_\_  
\_\_\_\_\_

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

Annual Income: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Landline: \_\_\_\_\_ Email ID: \_\_\_\_\_

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

Mother's Full Name, Title / Surname and Address: \_\_\_\_\_  
\_\_\_\_\_

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

Annual Income: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Landline: \_\_\_\_\_ Email ID: \_\_\_\_\_

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

Name and address of the person to whom the accounts should be billed and to whom  
accounts for fees should be sent: \_\_\_\_\_  
\_\_\_\_\_

GUARDIAN: If parents live abroad, name and address of guardian in this country (Who will take full responsibility for exeats, holidays, clothes etc., and who will in due course be required to sign an undertaking for this effect).

\_\_\_\_\_

Relationship to Pupil: \_\_\_\_\_

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

Annual Income: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Landline: \_\_\_\_\_ Email ID: \_\_\_\_\_

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

Names of the other family members at SREE VIDYANIKETHAN INTERNATIONAL SCHOOL

Present (Please give surname also): \_\_\_\_\_

Past: \_\_\_\_\_

Name(s) and age(s) of siblings other than those noted above: \_\_\_\_\_

\_\_\_\_\_

Do both parents have parental responsibility of the child? Yes / No  
(If "No" please give details here or in a covering letter)

Is there anyone else whose consent to the child coming to  
the School is required? Yes / No  
(If "Yes" please give details here or in a covering letter)

Is it proposed that anyone other than the parents will pay or guarantee payment of  
fees? Yes / No  
(If "Yes" please give details here or in a covering letter)

\_\_\_\_\_



## PREVIOUS RECORD

1. Present School: \_\_\_\_\_

State/Central/I B/IGSCE: \_\_\_\_\_ Date of Entry: \_\_\_\_\_

Head Teacher (Name, Title): \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax No: \_\_\_\_\_

Email ID: \_\_\_\_\_

Does your son/daughter have any boarding experience? \_\_\_\_\_

2. Previous school(s), with dates: \_\_\_\_\_

3. Give details of any ASSET/ISO/MO/CO/Trinity London/NSTE or any other intelligence test taken. Please indicate who administered each test and its date

4. Give details of any public examination taken (IGSCE/CBSE/ICSE/IS etc.) School name(s) including dates and grades \_\_\_\_\_

5. Games and physical activities School teams, time etc., (plus outside interests, school prizes, hobbies and positions of responsibility held)

6. Does your child have any learning difficulties of identified special education needs?

If there is an educational Psychologist's report, a copy should be provided along with the application

## GENERAL HEALTH

1. Is there any special health problem(s) of which the school should be aware?  
Are any treatments required?

2. Has your son/daughter ever suffered from an eating disorder? Up-to-date details will be requested for the benefits of the school medical officer shortly before entry

## PREVIOUS RECORD

Please inform in a covering letter if:

- A. The child has any known medical condition or health problems or allergy
- B. The parents are separated or divorced
- C. Any person named in this form expects to change address during the next '12 months
- D. There are any Court Orders in relation to child; for example, as to parental responsibility, residence, contact, prohibited steps, specific issues or periodical payments; or in relation to the parents or if either parent is an undischarged bankrupt or subject to an individual voluntary arrangement
- E. The child may be unable to play a full part in the games and sporting curriculum for the school. Would you be prepared to talk to any other parents considering sending their child to SVIS from your part of the world? (This only applies to overseas parents) YES / NO

## NOTES-ADMISSION ENTRY TO THE SCHOOL

Registration: Pupils will be considered as candidates for admission and entry to the school when the registration form has been completed and returned and non-returnable registration fee paid.

Admission and entry will be subject to the availability of the place and the pupil satisfying the admission requirement at the time. The school operates an equal opportunity policy.

Early registration is recommended.

Registration will be considered in the order in which they are received.

## DECLARATION

We request that the name of the above-mentioned child be registered as a prospective pupil. We understand that the standard Terms and Conditions of the school will undergo change from time to time as circumstances require and will apply in our dealings with the school. We understand that the school (through its head, as the person responsible) may obtain, process, and hold personal information about our child, including sensitive information such as medical details. We consent to this for the purpose of assessment, if a place is later offered, to promote and safeguard the welfare of the child.

ADD/Cash for the non-refundable registration Fee \_\_\_\_\_ are enclosed.

Please return this form to the Admission Office with 3 passport size photos of the pupil.

For NRI Nationals we also require a copy of the front cover and inside details of the pupil's passport.

First signature: \_\_\_\_\_ Second signature: \_\_\_\_\_

Name in full: \_\_\_\_\_ Name in full: \_\_\_\_\_

Relationship with child: \_\_\_\_\_ Relationship with child: \_\_\_\_\_