



**AKSHARA**

**INTERNATIONAL**

*School that instills continuous learning*

S.No.109, Akshara Lane, Wakad, Pune 411057

E-mail: admin@akshara.in/admissions@akshara.in Web: www.akshara.in

**REGISTRATION FORM**

Form No. \_\_\_\_\_

Reg. No. \_\_\_\_\_

I, \_\_\_\_\_ hereby seek to register the name

of my ward for admission in class 11<sup>th</sup> for the session 20\_\_\_\_ - 20\_\_\_\_.

Please grant him / her admission and oblige.

**STUDENT INFORMATION: (Please fill the Form in CAPITAL LETTERS ONLY)**

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



Date of Birth: \_\_\_\_\_ In words: \_\_\_\_\_

Age as on 01 June 20\_\_\_\_ Years: \_\_\_\_\_ Months: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Gender:  Male  Female Blood Group

Nationality: \_\_\_\_\_ Religion: \_\_\_\_\_ Mother Tongue: \_\_\_\_\_

Caste: General / OBC / SC / ST if yes, Sub Caste: \_\_\_\_\_

Name & Address of School studying in: \_\_\_\_\_

Affiliated to: \_\_\_\_\_

Residential Address (With Landmark): \_\_\_\_\_

Telephone Numbers: Father : \_\_\_\_\_ Mother: \_\_\_\_\_ Landline: \_\_\_\_\_

E-mail id Father: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

E-mail id Mother: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Address of Native Place: \_\_\_\_\_ Town: \_\_\_\_\_ Dist: \_\_\_\_\_ State: \_\_\_\_\_

**DETAILS OF PARENTS:**

Father's Name: \_\_\_\_\_

Educational Qualification : \_\_\_\_\_

Profession / Occupation: \_\_\_\_\_

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

Mother's Name: \_\_\_\_\_

Educational Qualification : \_\_\_\_\_

Profession / Occupation: \_\_\_\_\_

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

Annual Family Income: ₹ \_\_\_\_\_

**INFORMATION OF BROTHER/ SISTER:**

Name: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Class: \_\_\_\_\_

School: \_\_\_\_\_

**EMERGENCY CONTACT:**

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

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

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

Contact No. : Mob.: (P) \_\_\_\_\_ (O) \_\_\_\_\_ Landline: \_\_\_\_\_

**Subject Combination: (Please select 3 options with ranking.)**

**Option A**       **Option B**       **Option C**       **Option D**       **Option E**

English	English	English	English	English
Physics	Physics	Physics	Physics	Physics
Chemistry	Chemistry	Chemistry	Chemistry	Chemistry
Math	Math	Biology	Math	Biology
Biology	Computer Science	Computer Science	Physical Education	Physical Education

**Facilities Requested**

**Canteen:** \_\_\_\_\_ **Bus Route No.** \_\_\_\_\_ **Bus Stop:** \_\_\_\_\_

Pick Up/ Drop Point: \_\_\_\_\_

I, hereby declare that the information given by me in this application is true to the best of my knowledge. I agree to comply with the rules and regulations, terms and conditions of **AKSHARA** International School. I also declare that the documents I have submitted herewith are genuine.

Signature: \_\_\_\_\_  
(Father/ Guardian)  
Date: \_\_\_\_\_



Signature: \_\_\_\_\_  
(Mother)  
Date: \_\_\_\_\_



- **FIRST INSTALLMENT OF SCHOOL CHARGES ONCE PAID SHALL NOT BE REFUNDABLE**
- **Please note that any omission or willful suppression of information may jeopardize admission and the school will not be responsible for the consequences thereof at the beginning or during the academic year.**
- **The School reserves the right to accept or reject an application at its discretion.**

**OFFICE USE ONLY**

Form No. : \_\_\_\_\_

Receipt No. & Date: \_\_\_\_\_

**Documents Submitted:**

- Photographs       Copy of Birth Certificate       Original Transfer Certificate
- Domicile / Migration Certificate.       Copy of Mark sheet

Registered for Std. \_\_\_\_\_ Session \_\_\_\_\_ Date of Submission \_\_\_\_\_

Checked by \_\_\_\_\_

Admin. Coordinator \_\_\_\_\_

Principal \_\_\_\_\_

