

VIDYAVARDHAKA SMART SCHOOL

🛂 #48, Ashirvad Layout, Machohalli, Near Byndahalli, Dasanapura Hobli, Bengaluru North Tq. Bengaluru - 562 130. 📞 +080 9566 9588 / +91 88844 43504 🔻 vvsmartschool20@gmail.com 💈 www.vvsmartschool.com

APPLICATION FORM

Application No :	Date :
For the academic year :	
Student's Name: (In Block Letters)	
Sex: Male Female	
Date of Birth: Age (As on 1st June of the year)	Photo
Student Aadhar No:	
Registration for Admission to Class:	
Syllabus :	
I-Lang:	Admission No :
II-Lang:	
Place of Birth: Village Town	
Nationality: Religion:	Caste
[Tick as Applicable SC ST OBC General Others (Specify): _	
Mother Tounge:	
Residential Address:	
Father's Name:	
Academic Qualification:	
Profession/Designation:	
Ph: Mob: Email:	_
Mother's Name:	
Academic Qualification:	
Profession/Designation:	
Ph: Mob: Email:	
Annual Income of Parents:	_
Guardian's name and address (if applicable):	Mob:
Address for Communication:	
	Mob:

Instructions:

- All entries should be in the Parent's / Student's own handwriting (in English) and he / she will be responsible for any incorrect entry that is made.
- A Student is deemed to have been admitted into the class / course only after he/she has paid all the fee in full.
- At the time of admission, the Parent and the Student are required to sign the declaration that they will abide by the rules and regulations of the School.
- It is suggested that if the Student/Parent wish to give any other information like health details.
- Achievements and any other detail they may use a separate sheet of paper.

Name of the School with date last attended	Board (Tick the appropriate column)	Result of Previous class (If applicable) Overall Percentage/Grade Point
uate last attenueu	(Tick the appropriate column)	Overall Fercentage/ Grade Form
	CBSE	
	State	
	ICSE	
	IGCSE	
Reason for withdrawing from last school(If applie	cable):	
Details of brother / sister studying in Vidyavardh	aka Smart School:	
Brother Name:	Class:	
Sister Name:	Class:	
Name, Address, Contact		
Number & email id's of 2		
references		
Medical Information		
Student's Blood Group:		
History of illness, if any:		
Code Of Conduct / Instructions / Rules		
 I hereby read the rules and regulations of Vidis a student of the institution. The Admission of the Student can be cancelled intrest of Academics, affecting the progress of Punctualty should be the prime concern of all permission students without the required permission of the selection committee shall The decision of the selection committee shall 	d at any time of the year if the school for co-students progress or is affecting students, they should not abscond creentage of attendance are not eligible and I am fully aware that fees once ition does not guarantee on admission	ol decides that his/her continuance is not in the the image of the Institution. or be absent from school without prior ble for promotion. e paid are not refundable or transferable.
Declaration Of The Parent / Guardian		
I Acknowledge that I am aware of the rules and regulations of the institution and agree to abide by them and admit my child		
Master / Kum to to class in Your School and shall be responsible for the payment of		
School/Exam fee and other charges, and submit all the required certificates within the stipulated time as instructed to me.		
School, Laam lee and other charges, and submit	an the required tertificates within th	ne supulated time as histracted to me.
Date:	Signature of the Parent/Guardian	Signature of the Student
Documents to be submitted along with appl	-	
	Yes No If No, Reason	
Report card of previous school (If applicable) Transfer Cartificate (If applicable)	_	
Transfer Certificate (If applicable)Birth Certificate (Photo copy)	_	
Photographs (3 Nos)		
Aadhar Card		
Caste Certificate		
Particulars to be filled by the office:		
Admission No:Fee receipt No:		
Admitted to Class:Date of Admiss	ion:	Signature of Principal