

APPLICATION FORM

Application: **AF/**

Dated:

Applicant's full name :

Address :

City / Town: Pin:

Telephone:

Mobile:

Email address :

Date of birth :

Have you attached copy of birth certificate or passport?

If minor,
parents' / guardians'
name / address :

Have you attached consent letter in original?

Profession :

Office / Work address :

City / Town: Pin:

Course desired :

Time preferred :

Why I wish to join

- I have attached 2 stamp size and one passport size coloured photographs and all relevant documents.
- I declare that I have understood and agreed to abide by the rules & regulations of **The School**.
- I declare that I am aware that the Application+Registration fee is non-refundable and I shall not demand a refund
- I declare that I am aware that the course fee is non-refundable and I shall not demand a refund.
- I declare that I shall not seek private tuitions from any teacher of **The School**.

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Signature of Student



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