

Form No.

Scholar No. ....

Admission Date

CLASS ..... STREAM .....

STUDENT AADHAR CARD NO.

1.	Name of the applicant (In Block Letter)				Mob. 00000-00000
2.	Date of Birth (In figure & words)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	In words :		
3.	Gender M <input type="checkbox"/> F <input type="checkbox"/>	4. Category <input type="text"/>	GEN / ST / SC / OBC / SBC / OTH		
5.	Whether any physical disability (attach certificate)	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please specify :		
6.	Subject Offered in class XI & XII	<input type="checkbox"/> English Core <input type="checkbox"/> English Elective <input type="checkbox"/> Hindi Core <input type="checkbox"/> Hindi Elective <input type="checkbox"/> Physics <input type="checkbox"/> Chemistry <input type="checkbox"/> Biology <input type="checkbox"/> Mathematics <input type="checkbox"/> Accountancy <input type="checkbox"/> Business studies <input type="checkbox"/> Economics <input type="checkbox"/> Physical Edu. <input type="checkbox"/> Others .....			
7.	Father's Name (In Block Letter)				Mob. 00000-00000
8.	Mother's Name (In Block Letter)				Mob. 00000-00000
9.	Parent's Educational Qualification, Occupation & Annual Income	Educational Qualification	Occupation	Annual Income	
	Father				
	Mother				
10.	Present Address (Local)				
					Pin Code
		Phone No.		Mobile No.	
		E-mail address			
11.	Sibling (Real Brother / Sister) If Studying in this school	Yes <input type="checkbox"/> No <input type="checkbox"/>	Class _____ Section _____		
		Name of Sibling (In block letter)			
13.	Local Guardian in case of outstation students	Details with address & contact no.			

(For Class I to X Only)

Last School and Board Name .....

Previous School TC No. .... Grade / Overall Percentage .....

(For Class XI to XII Only)

Name of Class X Board : ( ) CBSE / ( ) ICSE / ( ) State Board (Kindly specify .....

Year of Passing X : ..... and Roll No. ....

Name of Class XI Board (if admitted in class XII) .....

**Documents to be attached with the Admission form : (Tick mark (✓) against the documents received:)**
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1. Birth Certificate issued by the Municipality / Municipal Council. (Self attested photo copy)
2. Residential proof (attested photocopy of Passport / Voter ID / Driving License / Pass Book of Nationalized Bank / Aadhar Card / Rent Agreement at least 3 months old.) (Self attested photo copy)
3. Marksheet of Previous class. (Self attested photo copy)
4. Previous School Transfer Certificate (T.C.) - (Original Copy)
5. Migration Certificate (other than RBSE) - (Original Copy)
6. 3 passport size color photograph with name and date.
7. Cast Certificate (Self attested photo copy)
8. Disability certificate, if any (Self attested photo copy)

**Note :** While submission of the registration form, the above mentioned documents are essentially required.

**DECLARATION**

I ..... parent/guardian of Master/Miss ..... hereby certify that the information given by me in this application is correct. I agree to abide by the rules and regulations of the school.

Date .....

Signature of Parent/Guardian

**UNDERTAKING**

I, ..... Father/Mother/Guardian of Master/Miss ..... seeking admission to class ..... in **IBB COLLEGE OF HYSIOTHERAPY**, Kota hereby give my consent for the following undertakings :-

1. I fully understand that the admission is purely provisional subject to submission of required documents stated above, failing which the provisional admission will stand cancelled.
2. I will not ask for refund of the fee deposited once in the school, at the time of withdrawal of my ward's admission.
3. I am fully aware of the fact that a minimum of 75% of total attendance is mandatory failing which my ward is likely to be debarred from appearing at Annual / R.B.S.E. Examination due to shortage of attendance.
4. I will clear all the school dues, as applicable, for the issuance of Transfer Certificate.
5. I will deposit the school fee as per the schedule given in the Fee Slip, failing which I shall deposit it with late fee as applicable.
6. I take full responsibility of the good conduct of my ward in the school and give my written consent to accept without any reservations, whatsoever disciplinary action including expulsion / rustication taken by the school authorities against my ward for indulging in any act of indiscipline or impropriety at the school.
7. He/She will not in any case be allowed to continue in the school after his/her failure in the same class twice, Principal is well within his rights to even demote the ward in his/her interest.
8. I agree to abide by all the rules/decisions of the school management framed/taken from time to time. I know that any breach on our part can lead to his/her expulsion from the school without notice and that the discretion and decision of the school authority is final.

Student Signature

Father Signature

Mother Signature

Name .....

Name .....

Name .....

**FOR OFFICE USE ONLY**

Name

Signature

Details verified by

\_\_\_\_\_

\_\_\_\_\_

Admission-in-charge

\_\_\_\_\_

\_\_\_\_\_

Admission in class

\_\_\_\_\_

Date

\_\_\_\_\_

Date : .....

Principal