



G. Rio School

ADMISSION FORM (CLASS: A)

DAY SCHOLAR / BOARDER



CBSE Affiliation No.: 1430016 School Code: 35339

High School Area, P.O Box: 702

Kohima, Nagaland – 797001

Email Id: grioschool@yahoo.in Tel Ph: 8837455637

Note:

1. The form should be strictly filled by the parents in their own hand-writing (IN BLOCK LETTERS).
2. The medical report of the student should be enclosed with this form.

Please **PASTE** recent passport size photo.

(Do Not Staple)

Following is the information regarding my Son Daughter

Class _____ 20____ - 20____

A. Particulars of the child:

Name of the child (In Capital letters): _____

Date of Birth: _____ Religion: _____ Tribe/Community: _____ Category: (ST/SC/OBC/GEN)

Present Address: _____

Permanent Address: _____

Aadhar No.(if available): _____ Mobile No.: _____

B. Particulars of Parents:

Father

Mother

1. Name: _____

2. Age: _____

3. Educational Qualification _____

4. Occupation/Designation _____

5. Dept./Address: _____

7. Mobile No.: _____

FOR OFFICE USE

Regd/Adm No.: _____ D.O.J: _____

Transportation: (Y / N) Point: _____

Concession: _____

Approved by: _____

Signature of the Parent with Date

(Signature)

Note: Provide valid Mobile Number for SMS Alert.

C. Previous School History:

(Include home schooling details)

SCHOOL ATTENDED	YEARS	LEVEL/CLASS

D. Details of siblings (Studying in G. Rio) :

NAME	DATE OF BIRTH	SEX (M/F)	CLASS

E. Local Guardian:

(TO BE COMPLETED IF PARENT IS NON-RESIDENT IN KOHIMA)

Name

Address

.....

Phone number:

F. Parent Evaluation:

We understand that it may be difficult for a parent to objectively evaluate his/her own child. However, we believe that your comments will be of value to us, particularly as compared with responses from others not so close to the student.

Please indicate your appraisal of your child's attitude towards school work and others/as applicable on a scale of 1-5 (1 = low, 5 = high)

	1	2	3	4	5	<u>Comments (if any)</u>
Organizational skills						
Motivation to study on his/her own						
Study habits						
Leadership Potential						
Relationship with peers						
Self-confidence						

AGREEMENT:

IMPORTANT DECLARATION to be consented approval of admission.

I agree to comply with the regulations of the school, including those relating to the charging of interest on unpaid bills and the assessment of fees for less than the required notice of a student's withdrawal or for the late arrival of a student. I agree to pay amounts due to the School promptly upon presentation of a statement. I understand that failure to pay fees could lead to my child's withdrawal from a school or public exam, the withholding of reports and exclusion from school. I also understand that failure to fill in the pre-admission medical forms accurately could lead to my child's exclusion from school. I enclose Rs. 1000/- as a non-refundable application fee, together with a copy of the student's latest school report.

Signed:

Date:

FOR OFFICE USE ONLY

Admit to Grade: _____

HOD's Remarks: _____

HOD: To sign once the student's place has been confirmed:

Signed:

Date:

II. Enclosures: For Parents Use (NOT TO BE SUBMITTED)

I. At the time of SUBMISSION of APPLICATION FORM:

The following documents should be submitted along with the **APPLICATION FORM**:

- a) Student's performance record of the previous school (if any).
- b) Birth Certificate (**Xerox copy**)
- c) Aadhar

NOTE:

1. Staple all documents to the top left-hand corner of the application.
2. PARENT should accompany the child during the time of Interview.

Students Information:

Greetings from G. Rio School. Due to the present situation, we are unable to conduct personal interview and therefore, a questionnaire is attached to be filled up to obtain more information about your child. We would appreciate your honesty in sharing the necessary information, to help us understand your child better.

Thank you for your co operation.

For Class A

1. Mention some of your child's hobbies. _____

2. Does he/she like to sing? (Yes / No)

3. Can your child identify and write Alphabets? (Yes / No)

4. Does your child recognize sounds of the Alphabets (phonic sounds)? (Yes / No)

5. What are your child's eating habits? Is he/she fussy or have any allergies?

6. Can your child identify and write Numbers? (Yes / No)

7. Can your child identify the colors and shapes? (Yes / No)

8. How do you expect the school to contribute in your child's life?

9. Was your child send to Day Care prior to this? (Yes / No)

10. List the language(s) your child can speak.

11. Is your child potty trained? (Yes / No)

12. Your child is currently living with –

Both parent s () Single parent () Grandparent () Guardian ()

13. My child's strong/weak areas

14. In brief, write about your child's nature.

15. Are there any other areas you want us to be aware of your child. Please specify.

