

Admission incharge: \_\_\_

## **KIDDIES CORNER HIGH SCHOOL**

Chingmeirong west, Imphal

## **ADMISSION FORM**

Principal

2 Photos

(stamp size)

		(All entries should	d be in capital	letters o	only)						L		Colour	
Full Name of the Student	First Name	: 🗆												
					1			1						
	Last Name	:												
Date of Birth	(In Figures) (In Words)	: [	(D D)	(M	M)		()	′EAR)						
1 + C -     A++														
Last School Attended  Aadhar No. (Xerox copy to b	e enclosed)	:												
Class to which admission is sou	·													
Transfer Certificate Submitted (No Admission will be regulariz and UKG, Birth Certificate in o	zed until Transfer	•				case (	of firs	st adr	nissic	on in	Pre-N	lur, N	lurse	ry, LKG
Nationality of child		Religion						Sex (	( <b>M/F</b> )	)				
Category: SC/ST/OBC/Gen. BPL (Yes/No):			onveyance ı	equire	ed or	not: (	(Yes/	No)						_
Fathe	r's Details					Mot	her's	Det	ails					
Father's Name:			   Mother'	s Nam	ie:									
Academic Qualification:			Mother's Name: Academic Qualification:											
Designation :			Designa											
Office Address:			Office A											
Mobile no.:			Mobile i	າວ.:										
E-mail ID:			E-mail II											
Permanent Residential Address			Present Residential/Local Guardians Address											
	 Pin						 P	 in						
Res. Phone no.:			Res. Phone no.:											
Any serious Ailment need to be the work of the serious Ailment need to be the serious Ailment														_
Date:	Sign							Sign	ature	e of F	ather	·		
Admit in class	Section	(OFFIC	CE USE ONL	Υ)										

		Admiss	ion No. :
Full Name of the Student:	First Name		
	Last Name		
Details of any sibling (real brot	her or sister) now in	KCHS, Chingmeirong west, Imphal	
Admn. No.	Class/Sec.	Name of th	e child
 If you (parents) are an <b>Alumni</b>	of KCHS, Chingmeiro	ng west, Imphal. Please mention the foll	owing:
Admission No.	Year of Passi		
<ol> <li>We, hereby, certify th</li> <li>Regarding date of bir</li> </ol>	th and correct name	ven in this admission form is correct and	
(in words)			
spelling of his /her na	ame is		(in block letters).
time.	at we shall not make	notification/instructions/circulars issued any request for a change either in the d	by the head of the school from time to ate of birth or the spelling of his/her name
Date:		Signature of Mother	Signature of Father
		INSTRUCTIONS	

## **INSTRUCTIONS**

- 1. The school reserves the right to cancel the admission of the student if it is found that the declaration/ certificate submitted at the time of admission are found to be false/incorrect.
- 2. All disputes are subject to the jurisdiction of Imphal High Court only.
- 3. If at any stage after admission, it comes to our notice that any information concerning the admission of the child has been withheld by the parents, or that incorrect information has been given, the admission will be cancelled and the name struck off from the class register.

Principal

## **UNDERTAKING**

We	(Father's name) &	(Mother's name)
Parents of	resident of	
our ward to Kiddies Corner High Sch information is found to be incorrect	ool, Chingmeirong west, Imphal is c or false, our ward shall automatical e in this regard. The admission will a	nation provided by us for admission of correct and we understand that if the lly debarred from selection/admission also stand cancelled if the information
We the parents also understand tha our ward.	t the application/registration/short	listing does not guarantee admission to
We the parents accept the process of by the school authorities.	of admission undertaken by the scho	ool and will abide by the decision taken
(Father's name & Signature)	_	(Mother's name & Signature)
Date:		