



## FOR OFFICE USE ONLY

DOCUMENT CHECK LIST (PLEASE TICK)	YES	NO
1. Admission form duly completed	<input type="checkbox"/>	<input type="checkbox"/>
2. Copy of birth certificate	<input type="checkbox"/>	<input type="checkbox"/>
3. Three passport size photographs each of mother and father	<input type="checkbox"/>	<input type="checkbox"/>
4. Five passport size photographs of student	<input type="checkbox"/>	<input type="checkbox"/>
5. Original transfer certificate / school leaving certificate duly attested (For Grade II and above)	<input type="checkbox"/>	<input type="checkbox"/>
6. Photocopy of original mark sheet of last grade passed	<input type="checkbox"/>	<input type="checkbox"/>
7. Medical certificate by a certified medical practitioner with details of allergies, blood group and any other chronic ailment	<input type="checkbox"/>	<input type="checkbox"/>
8. Copy of residential / address proof	<input type="checkbox"/>	<input type="checkbox"/>

\*Photographs of parents and guardians to be attached in admission form.

## ADMISSION REQUIREMENTS

• KG1 - KG2  • GRADE I	1. Authentic certificate showing date of birth 2. Vaccination record 3. Medical Certificate 4. 5 photographs
• GRADE II - GRADE XII	1. Transfer certificate from previous school 2. Migration certificate where applicable 3. Vaccination record 4. Medical Certificate 5. 5 photographs

# APPLICATION FORM

For office use only		
ADMISSION STATUS		<input type="checkbox"/> ADMITTED <input type="checkbox"/> REGISTERED
ADMISSION NUMBER.	REG. NO.	<input type="checkbox"/>
DATE OF ADMISSION: _____		
PHOTO		

Please fill in capital letters.

## I - STUDENT DETAILS

First Name / Middle Name / Surname (Leave a blank box between names)

<input type="text"/>																			
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

Date of birth:

<input type="text"/>	<input type="text"/>
----------------------	----------------------

<input type="text"/>	<input type="text"/>
----------------------	----------------------

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------

Date

Month

Year

Gender:

Male

Female

Blood Group: \_\_\_\_\_ Nationality: \_\_\_\_\_

Class to which Admission sought: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_

Emergency Contact Numbers: (1) \_\_\_\_\_ (2) \_\_\_\_\_

School Transport Required

Yes

No

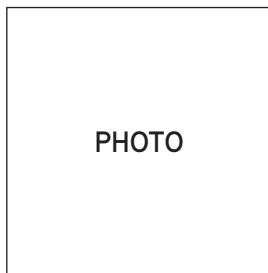
(If yes, then kindly fill in the transport form available with the Registrar / Transport Officer)

Catering

Yes

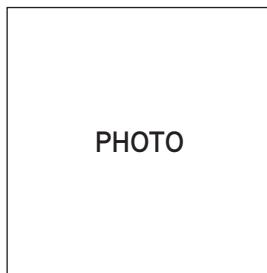
No

(If yes, then kindly fill in the Catering form available with the Registrar / Catering Officer)

**II - PARENT/GUARDIAN DETAILS**

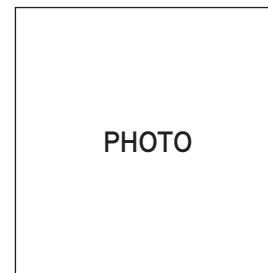
PHOTO

FATHER



PHOTO

MOTHER



PHOTO

GUARDIAN

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Nationality: \_\_\_\_\_

Residence Address: \_\_\_\_\_  
\_\_\_\_\_Education: \_\_\_\_\_  
\_\_\_\_\_Contact No. (Residence): \_\_\_\_\_  
\_\_\_\_\_Contact No. (Office): \_\_\_\_\_  
\_\_\_\_\_E-mail: \_\_\_\_\_  
\_\_\_\_\_Business/Organisation: \_\_\_\_\_  
\_\_\_\_\_Designation: \_\_\_\_\_  
\_\_\_\_\_Office Address: \_\_\_\_\_  
\_\_\_\_\_Aadhaar Number: \_\_\_\_\_  
\_\_\_\_\_PAN Number: \_\_\_\_\_  
\_\_\_\_\_**III - FAMILY DETAILS**

## Student's Sibling Details

1. Name: \_\_\_\_\_ School: \_\_\_\_\_

Admission No.: \_\_\_\_\_ Grade &amp; Section: \_\_\_\_\_

2. Name: \_\_\_\_\_ School: \_\_\_\_\_

Admission No.: \_\_\_\_\_ Grade &amp; Section: \_\_\_\_\_

**Note:** Submit 2 separate photographs each of Father, Mother & Guardian (same as above)

**IV – Mention your child's strengths, any three:**

---

---

---

---

**V – Anything you would like to share with us:**

(Academics, achievements, awards, special talents, health, guardianship etc.)

---

---

---

---

---

---

---

**Declaration:**

I \_\_\_\_\_ Parent / Guardian of \_\_\_\_\_ acknowledge that the school rules and policies as well as its fee structure may change from time to time, sometimes due to external factors such as changes in law, ministry regulations or market conditions. I also agree that the school accepts no liability for the services provided and I agree to indemnify the school for the same. I, hereby certify with my signature that all the statements in this document are true.

I understand that the admission remains provisional until all documents are duly submitted.

---

Date / Month / Year

---

Father's Signature

---

Mother's Signature

---

Guardian's Signature  
(if applicable)

# ADMINISTRATION FORM

## DECLARATION

My son / daughter / ward \_\_\_\_\_ of Grade: \_\_\_\_\_ Section: \_\_\_\_\_ will be availing the following facilities:

### 1. TRANSPORT

YES

NO

(If yes, kindly fill the following):

Pickup Point: \_\_\_\_\_

Landmark: \_\_\_\_\_

Telephone No. : Mobile: \_\_\_\_\_ Residence: \_\_\_\_\_ Office: \_\_\_\_\_

### 2. CATERING

YES

NO

Parent's Name/Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Accountant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## FOR OFFICE USE ONLY

Transport (w.e.f.) \_\_\_\_\_ Catering (w.e.f.) \_\_\_\_\_

Bus Number: \_\_\_\_\_

Name of Driver: \_\_\_\_\_

Route: \_\_\_\_\_

Admission Officer's Signature: \_\_\_\_\_

# ADMISSION SLIP

## STUDENT DETAILS

## ADMISSION NO.

Name of the Student: \_\_\_\_\_

Admission to Grade: \_\_\_\_\_ Academic Session: \_\_\_\_\_

Nationality: \_\_\_\_\_

Second Language (VI - VIII): \_\_\_\_\_ Second Language (IX - X): \_\_\_\_\_

Third Language (VI - VIII): \_\_\_\_\_

Stream Option (XI - XII):      Science       Commerce       Humanities

Father's / Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No. : Mobile: \_\_\_\_\_ Residence: \_\_\_\_\_ Office: \_\_\_\_\_

Aadhaar Number: \_\_\_\_\_ PAN Number: \_\_\_\_\_

## DETAILS OF LAST SCHOOL ATTENDED:

Name of the school: \_\_\_\_\_ Last Class attended: \_\_\_\_\_

Address: \_\_\_\_\_

Academic year followed from: \_\_\_\_\_ To: \_\_\_\_\_

Syllabus Followed in the last studied School:  CBSE  ICSE  IGCSE  IB  STATE

Whether Promoted to the next higher class or not:  YES  NO

Language Studied: II Language \_\_\_\_\_

III Language: \_\_\_\_\_

## FOR OFFICE USE ONLY

### TO CLASS TEACHER

Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Section: \_\_\_\_\_ Catering:  Yes  No

Admission No.: \_\_\_\_\_ Date of Admission: \_\_\_\_\_

Fee Settlement: \_\_\_\_\_ Bus Route: \_\_\_\_\_

Admission Officer's Signature: \_\_\_\_\_

## STUDENT'S MEDICAL RECORD

NAME: \_\_\_\_\_

CLASS / SECTION: \_\_\_\_\_ CLASS TEACHER: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ GENDER: \_\_\_\_\_

WEIGHT (IN KGS): \_\_\_\_\_ HEIGHT (IN CMS): \_\_\_\_\_

EYES: \_\_\_\_\_

TEETH: \_\_\_\_\_

EARS: \_\_\_\_\_

BLOOD GROUP: \_\_\_\_\_

GENERAL HEALTH: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DOCTOR'S REMARKS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Doctor's Signature): \_\_\_\_\_

EMERGENCY CONTACT DETAILS:

Name: \_\_\_\_\_ Relationship with the Child: \_\_\_\_\_

Address: \_\_\_\_\_

(Landline): \_\_\_\_\_ (Mobile): \_\_\_\_\_

## TO BE FILLED BY PARENTS

FATHER'S NAME: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_

FATHER'S MOBILE: \_\_\_\_\_ MOTHER'S MOBILE: \_\_\_\_\_

RESIDENCE ADDRESS: \_\_\_\_\_

OFFICE ADDRESS: \_\_\_\_\_

RESIDENCE NO.: \_\_\_\_\_ OFFICE NO.: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CHILD'S ALLERGIES, IF ANY: \_\_\_\_\_

ALLERGIES TO ANY PARTICULAR MEDICINE: \_\_\_\_\_

HISTORY OF THE CHILD'S IMMUNISATION / INOCULATION PROGRAMME:

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

5. \_\_\_\_\_ 6. \_\_\_\_\_

Kindly attach a copy of the inoculation card or medical card.

Any trauma suffered by the child in the past e.g. accidents, major illness, diseases etc. which need a mention for our record? Please write a brief history \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Kindly attach medical certificate or a copy of doctor's diagnosis report for our records)

Name and phone no. of family doctor / physician / pediatrician: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Father's Signature

Mother's Signature

Guardian's Signature  
(if applicable)

### Permission Letter for Publication of Students Work or Photographs

Dear Parent/ Guardian,

We request your permission for photographs/ videos of your child to be taken during school activities for the purpose of publishing photographs of your child and/or samples of work done by your child in a variety of ways. The publications could include, but are not limited to, school newsletters (online and in hard copy), presentation or broadcast via newspaper, internet or other media sources, school annual magazines, promotional materials created for the school, etc. If published, third parties would be able to view the photographs and work.

**If you sign the attached form it means that you agree to the following:**

- i) The school is able to publish photographs of your child and samples of your child's work as many times as it requires in the ways mentioned above;
- ii) Your child's photograph may be reproduced either in colour or in black and white;
- iii) The school will not use your child's photograph or samples of your child's work for any illegal purpose.

Any photographs taken by the school will be kept with the school in perpetuity and may be used by the school even after the child has either left or passed out of the school.

The school will at all times endeavor to protect the identity of your child however, the same cannot guarantee that your child will not be able to be identified from the photograph or work.

If you agree to permit the school to take photographs of your child, and to publish photographs of your child, or samples of your child's work, in the manner detailed above, please complete the consent form attached herein below. This consent, if signed, will remain effective in perpetuity and will irrevocably grant us the approval to publicize without prior notification.

### Consent Form for Publication of Students' Work or Photographs

I/ We agree and grant the school the right to take photographs/ videos of my child during school activities, which shall be used by the school in perpetuity for the purposes stated herein above. I with full knowledge also agree to the publication of photographs or samples of work of my child and waive all claims for compensation for use or for damages of any kind whatsoever.

Student's Name : \_\_\_\_\_ Student's Roll No.: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### DECLARATION BY PARENTS/ GUARDIAN

We are herewith seeking admission for our son/daughter/ward \_\_\_\_\_ in the School after having read and understood the terms and conditions stated herein below. The below mentioned terms are acceptable to us and we have unconditionally and unequivocally agreed to abide by the terms Laid out below without any undue influence, duress and or coercion of any nature in any manner whatsoever.

1. We hereby solemnly declare that we have made this application seeking admission for our child/ward after having read and understood all the rules of admission.
2. We declare that the information furnished by us in this application is true to the best of our knowledge, information and belief.
3. We fully understand that no other document shall be substituted for those mentioned in this application Form at the time of admission.
4. We declare that we shall at all times abide by the instructions contained in the School Almanac Parent protocol / Parent's Handbook as amended from time to time, and or any other rules, regulations etc. that may be framed and/ or is being followed by the School from time to time, by way of circulars or otherwise.
5. We agree and understand that the admission given to our child shall at all times be provisional in nature till the authenticity of the documents furnished by us is determined by the School. We further agree and understand that in the event any of the documents as produced by us is proved to be false, fabricated and/ or obtained by any fraudulent means. The admission given to our child shall stand cancelled. Further, we also agree to furnish all the required documents within seven (7) days from the date of execution of this admission form failing which we understand and agree that the Admission shall stand cancelled.
6. We understand and agree that the Admission of our child to School is subject to availability of seats and is further subject to the scrutiny of this Admission Form at the time of the admission process. Submission of the Admission Form itself shall not be conclusive proof of admission being granted to our child.
7. We fully understand and accept that the fees are required to be paid on or before our child/ward joins the School and thereafter each year before the commencement of the Academic Year, and or as and when demanded before the intimated due date. Fee once paid shall not be refunded in any event. We also understand that while the school may at its sole discretion, permit or grant the facility to pay the fees in one or more instalments. The same does not in any manner vest any right in the parents to demand to make payment of fees by way of instalments. The decision of the management of School shall be final in this regard.
8. In case of any cheque towards payment of fees is dishonoured. The management reserves the right to de-enrol the child at its discretion and/or levy any other penalty as it may deem fit. However in the event of such a dishonour of cheque, the management of School reserves its right to initiate any proceedings against the giver of the cheque, in accordance with law.
9. The management reserves the right to disallow a-child from attending the school or participating in any of its activities if his/her fees are not paid either in part or in full.

10. School reserves its right to increase/ revise/ amend the fee structure from time to time for any reason whatsoever. Further, we understand that any discount given to the fees shall only be a one-time event and there shall be no fee discounts given thereafter. We also agree that the increase/ revision/ amendment to the fee structure shall be done by the School keeping in mind the actual fee quoted and not the discounted fee that was given.
11. We undertake and give our unequivocal consent not to initiate any proceedings against the School and/ or management and/ or its personnel for any mishap and/ or accidents and/ or any untoward incident that may occur when our child/ ward uses the School bus and/ or any other means of transportation provided by the School when the child/ ward travels for any School field trip picnics/ sports activity and/ or any other activity/ competition. We undertake to indemnify and hold the School, its management and its personnel harmless in the event of any loss or injury to the property or person, including injury resulting in death due to any reasons whatsoever which our child/ ward may suffer, while, or in consequence of his/ her participation by travelling in the school bus and/ or any other means of transportation provided by the School. We understand that no compensation will be paid by the School and/or its management and/ or its personnel in this regard. We as parents and/ or guardians, waive all the rights that we may have in this regards accordingly.
12. We hereby declare that we will not be a part of any auto-rickshaw or illegal vehicle pool as a mode of transport for our child/ ward.
13. The School shall be at liberty to modify any of the terms and conditions to this Admission Form and we herewith give our consent in advance to any of the changes to be made to this Admission Form and/ or any other policies of the School, keeping in mind that any changes and/ or amendments made to this Admission Form and/or the policies of the GEMS Public School shall be for the benefit of our child/ ward.
14. The School \_\_\_\_\_ is an all-inclusive School, and the School has made all endeavours to provide valuable education to its students and even take care of their special needs and requirements.
15. We, the parents/ guardians, shall make all efforts to determine whether or not our child/ ward requires special attention and care, prior to their admission with the School. If prior to admission of the child/ ward in the School, the fact the child/ ward requires special attention and care is within our knowledge then we shall communicate the same to the School and shall also provide any additional assistance that the School may require for this purpose. We also undertake to bear all the costs and expenses in this regard.
16. If upon the admission of the child to the School, the student counsellor and/ special educator indicates that the child/ ward requires special assistance then the School shall immediately bring this to our knowledge and we as parents/ guardians will ensure that special assistance is provided to the child/ ward forthwith at our costs and expense.
17. To clarify if the child/ ward is administered with ADHD, Down Syndrome, Asperger or any other physical and/ or mental disability, either before or after admission to the School. We undertake to provide the necessary assistance including but not limited to hiring a professionally trained shadow teacher for our child/ ward at our own costs and expenses.
18. We understand that if the child/ ward is identified with symptoms of any learning difficulties or deficiencies, the child/ ward will have to undergo an assessment test at the discretion of the School, with the School counsellor. The School counsellor shall thereafter provide a report of the assessment and the child/ ward the school will request for a similar report to be provided from a medical practitioner at the earliest and the child/ ward shall have to undergo remedial teaching with the School's counsellor after the School hours. We undertake to bear the costs of the same.

19. We further undertake to inform GEMS Public School about all the medical issues and medical treatment that the child/ward is presently undergoing and/or that the child/ward may undergo in the future. We will ensure that all the required medication shall be provided to the child/ward and GEMS Public School shall be informed of any special assistance and/or leeway that ought to be given to the child/ward as a result of this condition. We also undertake to bear all the costs and expenses towards ensuring that our child/ward is provided with all the assistance that he/she may require in this regard.
20. In the event of any separation between the spouses (being the parents and/or the guardian of the child/ward) either Legally or otherwise, the parent shall produce a document, being a valid order from a competent Court, clearly evidencing to whom the custody of the Child ought to be given to the School shall from then on communicate with that Parent to whom the custody is given to.
21. We agree and adhere to dropping our child/ward to the School at the time prescribed by the School management. However we understand that in the event of any unavoidable circumstance there shall not be a delay of more than five minutes. We further adhere to picking up our child/ward at the time mentioned by the School in the afternoon/ evening, as the case may be, without any delay and in the event of a delay. The delay shall not be more than ten minutes.
22. We further understand that the child's performance is not directly attributable to the School in the event the child's/ ward's performance is below average and no improvement is seen even after all the help and assistance made by the GEMS Public School the GEMS Public School shall not be held responsible for the same.
23. We, the parents/ guardians of Master/Miss \_\_\_\_\_ of the GEMS Public School herewith give this undertaking and accordingly execute this Admission Form after having read all its contents and upon satisfaction of each of the terms mentioned therein and accordingly give our unequivocal consent on the above.

We have carefully read the Admission form and all other documents, provided by the School and agree to abide by the policies, rules, and regulations along with any substitutions and/or modifications made to them made by the school or its management from time to time.

Place: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Father: \_\_\_\_\_ Signature of Mother: \_\_\_\_\_

Signature of Guardian: \_\_\_\_\_ Relationship to the Child: \_\_\_\_\_

### **TRANSFER POLICY**

Internal transfer from one Gems school to another is possible subject to availability of seats. In such a case, child transferred to another branch would need to adhere to the policies, rules and regulations and the prevailing fee structure of that particular Branch.

### **FEES PAYABLE AT THE TIME OF ADMISSION**

all fees shall be non-refundable under all events.



**GEMS International School\***  
Block C-2, Palam Vihar,  
Gurugram, Haryana 122015  
CBSE Affiliated School #530889

 95821 99008  
73030 96206

-  @GemsInternationalSchool
-  @gisgurugram
-  @gisgurugram