Inventure Academy
Whitefield-Sarjapur Road
Chikkavaderpura
Near Dommasandra Circle
Bangalore 562 125
India

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## **APPLICATION FORM**

| Student Information  Name                        |                    | Photo                                 |
|--|--------------------|---------------------------------------|
| (First)  | (Middle)           | (Last)                                |
| Gender Male Female                               | Date of Birth      | Age as on June (of the academic year) |
| Mother Tongue                                    | Nationality        |                                       |
| Entry Class                                      | Year of Enrollment | Blood Group                           |
| Aadhar Card No.                                  |                    |                                       |
| Permanent Residential Addre                      | ess                |                                       |
| Telephone(Home)                                  | Pin                | code                                  |
| Postal Address(If different from residential add |                    |                                       |
| Parent/Guardian Informa                          | ition              |                                       |
|  | Mother             | Father                                |
| Full Name  |                    |                                       |
| Educational Qualification                        |                    |                                       |
| Occupation & Designation                         |                    |                                       |
| Company/Organization                             |                    |                                       |
| Mobile Number                                    |                    |                                       |
| Email ID   |                    |                                       |
| Office Address                                   |                    |                                       |
| Telephone(Office)                                |                    |                                       |
| PAN Card No.                                     |                    |                                       |
| Aadhar Card No.                                  |                    |                                       |

Sibling/s Information
Sibling/s Details (list from eldest to youngest)

| Name  |            | Date of            | Gender          | If applying to    | If yes,  | Name of     |
|---|------------|--------------------|-----------------|-------------------|----------|-------------|
|   |            | Birth              | M/F             | Inventure         | what     | current     |
|   |            |                    |                 | Academy(Y/N)      | class    | school      |
|   |            |                    |                 |                   |          |             |
|   |            |                    |                 |                   |          |             |
|   |            |                    |                 |                   |          |             |
|   |            |                    |                 |                   |          |             |
| Student is living with: Both Parents Mother Guardian Guardian |            |                    |                 |                   |          |             |
| Languages Spoken at Home                                      |            |                    |                 |                   |          |             |
|   |            |                    |                 |                   |          |             |
| Proficiency in English:                                       | Writing    | g in English       | Moderate        | Fluent            |          |             |
|   | Reading    | g in English       | Moderate        | Fluent            |          |             |
|   |            |                    |                 |                   |          |             |
|   | Speakir    | ng in English      | Moderate        | Fluent            |          |             |
|   |            |                    |                 |                   |          |             |
| 2 <sup>nd</sup> Language child has                            | studied/   | ing                |                 |                   |          |             |
| 3 3   |            | <u> </u>           |                 |                   |          |             |
| Previous Education:   |            |                    |                 |                   |          |             |
| Name of the   | Le         | ocation            | Class com       | pleted Years      | attended | Language of |
| school  |            |                    |                 |                   |          | Instruction |
|   |            |                    |                 |                   |          |             |
|   |            |                    |                 |                   |          |             |
|   |            |                    |                 |                   |          |             |
|   |            |                    |                 |                   |          |             |
|   |            |                    |                 |                   |          |             |
|   |            |                    |                 |                   |          |             |
|   |            |                    |                 |                   |          |             |
|   |            |                    |                 |                   |          |             |
|   |            |                    |                 |                   |          |             |
| Attach all report cards/tr                                    | ranscripts | s, letters of reco | ommendations (I | ast 2 Years)      |          |             |
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| ·   |            |                    |                 |                   |          |             |
| ·   |            |                    |                 |                   |          |             |
| Achievements in co-cur  | ricular    | activities         |                 |                   |          |             |
| Achievements in co-cur  | ricular    | activities         |                 |                   |          |             |
| Achievements in co-cur  | ricular    | activities         |                 |                   |          |             |
| Achievements in co-cur  | ricular    | activities         |                 |                   |          |             |
| Achievements in co-cur  | ricular    | activities         |                 |                   |          |             |
| Achievements in co-cur  | ricular    | activities         |                 |                   |          |             |
| Achievements in co-cur  | ricular    | activities         |                 |                   |          |             |
| Achievements in co-cur  | ricular    | activities         |                 |                   |          |             |
| Achievements in co-cur  | ricular    | activities         |                 |                   |          |             |
| Achievements in co-cur  | ricular :  | activities         | up a grade? Pl  |                   |          |             |
| Achievements in co-cur  | ricular :  | activities         | up a grade? Pl  | ease give details |          |             |

| Has your child ever received any le | earning support? If yes, please indicate are         | eas below and give details:   |
|-------------------------------------|--|-------------------------------|
| Speech and Language                 | Reading and Writing                                  | Mathematics                   |
| Social/Behavioral Skills            | Motor Skills (eg. Handwriting or Physical Education) | Others                        |
|                                     |  |                               |
| What are your long term goals for   | your child?  |                               |
|                                     |  |                               |
|                                     |  |                               |
| What type of learning environmen    | t do you think is required for your child            | to fulfill his/her potential? |
|                                     |  |                               |
|                                     |  |                               |
| How do you think admitting your     | child into Inventure Academy will help ac            | hieve this?                   |
|                                     |  |                               |
|                                     |  |                               |
| How did you hear about Inventure    | e Academy?   |                               |
|                                     |  |                               |
|                                     |  |                               |
| Which other schools have you app    | olied to?  |                               |

Note: If you would like to apply for a scholarship, please refer to  $\underline{www.inventureacademy.com/admissions/scholarships o}$ r email us at admissions@inventureacademy.com

| Two areas in w    | hich you would be willing to p  | articipate/volunteer at Inventure.                   |                                   |
|-------------------|---------------------------------|--|-----------------------------------|
| Career            | /College Counselling            |  |                                   |
|                   | Lectures in an area of your ex  | pertise  |                                   |
| Field Tr          | · ·                             | F  |                                   |
|                   | hips at your place of work      |  |                                   |
| PODS-             | Special interest groups/clubs   |  |                                   |
| Change            | e Maker                         |  |                                   |
| Food C            | Committee/Health & Nutrition    | ı  |                                   |
| Sports            |                                 |  |                                   |
| Others            | s, please specify               |  |                                   |
|                   |                                 |  |                                   |
| \A/bat rala da v  | you think you should play in yo | sur shild's adustion as a parent?                    |                                   |
| vvnat role do y   | ou think you should play in yo  | our child's education as a parent?                   |                                   |
|                   |                                 |  |                                   |
|                   |                                 |  |                                   |
|                   |                                 |  |                                   |
|                   |                                 |  |                                   |
|                   |                                 |  |                                   |
| lf you would lik  | te to add any extra information | <mark>n about your ch</mark> ild please do so below: |                                   |
|                   |                                 |  |                                   |
|                   |                                 |  |                                   |
|                   |                                 |  |                                   |
|                   |                                 |  |                                   |
|                   |                                 |  |                                   |
|                   |                                 |  |                                   |
| "1                |                                 | represent that I                                     | have the authority to admit my    |
| "l,               |                                 | , represent that r                                   | have the additionty to admit my   |
| child/ward,       |                                 | , into the school as the parer                       | nt/legal guardian. I undertake to |
| ·                 |                                 | <del></del>  |                                   |
| bring any fact,   | which may make this repres      | entation untrue in the future, to the i              | mmediate notice of the school.    |
| l declare that t  | he statements given in this ap  | plication are correct and, if found other            | wise, the Management reserves     |
| the right to car  | ncel the application/admission  | . I agree to abide by the Rules and Reg              | ulations and Fees Schedule and    |
| Policies of the S | School."                        |  |                                   |
| _                 |                                 |  |                                   |
| Signature:        | Father                          | Mother   | Guardian                          |
|                   |                                 |  |                                   |
|                   |                                 |  |                                   |
|                   |                                 |  |                                   |

Date: