



RAM RATNA VIDYA MANDIR

ISO 9001:2008 Certified School ♦ CBSE Affiliation No.1130044
Keshav Srushti, Uttan, Bhayander (W), Thane: 401106. Tel.: 0091-22-28450707/0718, Fax: 0091-22-2845050,
Website: www.ramratnavidyamandir.org Email: principal@ramratnavidyamandir.org



STUDENTS DETAILS

Sr.No: _____ Standard in which Admission is sought: _____

Please tick (✓) *whether*: Indian Citizen () NRI ()
(Please affix stamp size colour photograph)

CHILD

FATHER

MOTHER

Name in full: _____
(In Block Letters) Last Name First Name Middle Name

Date of Birth: _____
Day Month year

Birth Place: Town/village _____ State _____ Country _____

Caste _____ Religion _____

Whether a Member of a scheduled caste or tribe or a community classified as backward class or tribe by the State Government _____

If the answer is yes, attach a documentary proof _____

Language a) Spoken at home _____ Mother tongue _____

b) Medium of education at previous school _____

Personal details a) Height _____ cms. b) Weight _____ kgs.

Special interest in hobbies, games, music or ther extra curricular activities. Please specify*

Past illness if any? Pl. give history*

Does the child have any identified allergies? If so, give details*

Any Physicals/ mental handicap :Please describe how it affects the child's behavior and functioning*

Records of previous education :please start with the last school.

Serial No.	Name of the school	Board State/CBSE/ICSE/ International	Year	Std passed	% of Marks/ Grade

Prizes or awards won either for scholastic or non-scholastic achievement? If yes, give details*

Was the child suspended / rusticated from any school for disciplinary or academic reasons?
Please tick () Yes () /No () If yes, give details

PARENTS DETAILS

FATHER

MOTHER

Name

Date of Birth

Blood Group

Education

Occupation

(If business nature?)

Anniversary Date

Annual Income

Email ID(Essential)

Sibling:

Name	Date Of Birth	Education	Description

Parent's residential address

_____ Pincode _____

Tel.No. (Resi) _____

Mobile _____

Email ID _____

Local guardian address

_____ Pincode _____

Tel.No. (Resi) _____

Mobile _____

Email ID _____

I certify that the information furnished above is complete and correct to the best of my knowledge.

Date: _____

Signature of the parent: _____ Signature of the local guardian _____

ANAEXURE "A"

UNDERTAKING BY LOCAL GUARDIAN

I Shri / Smt. _____ solely

Declare that I have read the rules and regulations of RAM RATNA VIDYA MANDIR and assure you that I shall abide by them as local guardian of the student (Name of the student) _____

Full Name of the local guardian _____

Relationship with the students _____

(Affix recent
passport-size
colour
photograph of
the local
GUARDIAN)

Signature of local guardian _____

Date: _____ Place: _____

I/ We accept MR. / Mrs. _____ as a local guardian of my ward

Mst. _____

GR.NO. _____ Signature of the parent with name: _____

Personal details of the students (MANDATORY)

Name of the student: _____ Std _____ GR.NO _____

Reason for sending child in residential school.

Strong points about your ward

Points for improvement in your ward

Kindly mention any confidential thing about your ward that needs to be taken care

I certify that the information furnished above is complete and correct to the best of my knowledge.

Date: _____

Signature of the Father _____ Signature of the Mother/ Guardian _____