



O. P. JINDAL SCHOOL, RAIGARH (CG) 496 001

Phone: 07762- 227042, 227293, 227001-05 (Ext. 49801, 49802, 49804, 49805)

Fax : 07762-262613; E-mail: jsrghcg@sancharnet.in; Website: www.opjsrgh.in

FORM NO:

ADMISSION FORM

FOR OFFICE USE ONLY

a) Admission No. _____

b) Date of Admission _____

c) Admission granted in class _____

Signature of the Principal

PLEASE **PASTE** THE LATEST
PASSPORT SIZE
COLOUR PHOTOGRAPH
OF THE CHILD

(DO NOT STAPLE)

PHOTOGRAPH OF THE STUDENT

PLEASE **PASTE** THE LATEST
PASSPORT SIZE
COLOUR PHOTOGRAPH
OF THE MOTHER

(DO NOT STAPLE)

PHOTOGRAPH OF THE MOTHER

PLEASE **PASTE** THE LATEST
PASSPORT SIZE
COLOUR PHOTOGRAPH
OF THE FATHER

(DO NOT STAPLE)

PHOTOGRAPH OF THE FATHER

.....
SIGNATURE OF MOTHER

.....
SIGNATURE OF FATHER

1. NAME OF THE STUDENT (IN BLOCK LETTERS) :
2. DATE OF BIRTH (IN FIGURES) :
- (IN WORDS) :
- SEX : _____ RELIGION : _____ CASTE : [ST / SC / OBC / GENERAL]
- (Male / Female) (Tick out the correct one & submit the Photo Copy of caste certificate, if belongs to ST/ SC/OBC)
3. CLASS TO WHICH ADMISSION IS SOUGHT :
4. CLASS IN WHICH HE/SHE LEFT THE PREVIOUS SCHOOL :
5. NAME OF THE SCHOOL ATTENDED LAST :
6. DETAILS OF TRANSFER CERTIFICATE : Sl. No. _____ Date: _____
7. WHETHER THE CHILD IS VACCINATED :

8. DETAILS OF FAMILY	Name	Qualifications	Nationality	Occupation
i. Father				
ii. Mother				
iii. Brother(s)				
iv. Sister(s)				

9. DETAILS OF GUARDIAN (IF FATHER IS NOT ALIVE / STAYS OUT OF STATION)

Name: Qualifications: Relationship with the ward:

10. WHETHER THE FATHER / GUARDIAN IS AN EMPLOYEE OF THE JINDAL STEEL & POWER LTD. / JINDAL POWER LIMITED / NALWA STEEL & POWER LTD. / STATE GOVT./ CENTRAL GOVT./ ANY OTHER ORGANIZATION (PLEASE GIVE FULL DETAILS BELOW):

Name and address of the Department / Department	Designation & Employee Code	Salary / Annum

11. Present address of the student

.....	Phone No. :	
	Fax No. :	
	e-mail :	

12. Permanent address of the student

.....	Phone No. :	
	Nearest Railway Station :	

13. Area of interest where parental contribution may enrich the school (Please tick out the appropriate areas) :

<ul style="list-style-type: none"> ▪ Music / Dance / Drama <input type="checkbox"/> ▪ Academics <input type="checkbox"/> ▪ Bus / Outing Supervision <input type="checkbox"/> ▪ Sports <input type="checkbox"/> ▪ Community Programme <input type="checkbox"/> 	<ul style="list-style-type: none"> ▪ Social Skills <input type="checkbox"/> ▪ Public Speaking <input type="checkbox"/> ▪ Medical <input type="checkbox"/> ▪ Media / PR <input type="checkbox"/> ▪ Painting / Sculpture <input type="checkbox"/> 	<ul style="list-style-type: none"> ▪ Communication Skill <input type="checkbox"/> ▪ Career Counselling <input type="checkbox"/> ▪ Others, if any (Please specify) _____
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14. Whether Bus facility is needed : Yes / No If yes, Bus No. & stop :
 (to be filled by the office)

Declaration

I solemnly declare that all the information furnished by me in this application is true to the best of my knowledge and belief. I will bind myself to the present rules of the school or as modified by the school from time to time. I undertake full responsibility for the payment of fees on account of my ward. I shall give one month's notice for the withdrawal of my ward or shall pay one month's fee in lieu, there of. I accept that the decision of the Principal / Headmaster with regard to the discipline of the school would be final and binding on me. I hereby ensure that in case my ward is found to be suffering from any contagious / constitutional / hereditary disease or infirmity, I will immediately bring it to the notice of the authority of the school. I will ensure that he/she is regular in studies, in attending all the activities organized by the school and the payment of fees and dues are made on time. Under any circumstance, I will not approach the authority of the school for any change in the schedule pertaining to examination, curricular and co-curricular activities. I will extend full co-operation to the well being of the school. I hereby ensure that all the instructions given to my child/ward by the school authority will be adhered to.

Date:

Signature of Father/Guardian

Place:

Signature of Mother