



JUBILEE HILLS PUBLIC SCHOOL

Rampally, Kesara Mandal, Hyderabad.
Phone : 9515943805, E-mail : info@jhpsrampally.com Website : www.jhpsrampally.com

APPLICATION FORM

Application No. :

Admission sought in class :

Affix latest
passport Size
photograph

(STUDENT)

Affix latest
passport Size
photograph

(FATHER)

Affix latest
passport Size
photograph

(MOTHER)

1. NAME OF THE STUDENT WITH SURNAME* :
(IN BLOCK LETTERS As per DOB Certificate)

Note : The above name will be registered permanently in the school records and all certificates and reports shall be issued on this name only.
Any change at a later date will be accepted only by documentary proof.

2. Gender (Please put the ✓ mark) : Male Female

3. Aadhar Card Number of the student :

4. Date of Birth :

5. Age at the time of admission (as on 31st March) : _____ Years _____ Month(s) _____ Day(s)

6. Residential Address :

7. Place of Birth : _____

8. District : _____ State _____

9. Nationality : _____ Religion _____

10. Category (Please put the ✓ mark and attach relevant certificate as applicable) : SC ST BC OC PC

11. Mother Tongue : _____

12. Identification Marks : 1. _____
2. _____

13. SMS to be sent to Mobile No. (For updating Academic / Admin information) : _____

14. Details of the previous school(s) attended

Name of the previous School(s) & Address(es)	Year/s of study	Class studied	Medium of instruction	Marks/ Grade	SSC / CBSE/ ICSE / Any Other

15. Any academic difficulties

E.g. : Dyslexia

16. Distance of the school from the residence : Kms.

17. Transport Facility : Own School Boarding Point (Stop) : _____
 (Note : Providing transport facility is not mandatory on part of the school.)
 Alighting Point (Stop) : _____

18. Emergency contact details

1) Name : _____ Mobile : _____

2) Name : _____ Mobile : _____

19. First Language (Medium of Instruction) : English

Second Language (Select One)

Classes I to X : Hindi Telugu

Third Language (Select One)

Classes VI to VIII : Hindi Telugu Sanskrit

20. Special Talents, if any, in any field

Child	
Father	
Mother	

21. HEALTH DETAILS

Blood Group Report (compulsory) : _____

Eye Sight : Left Eye _____ Right Eye _____

Physical / Mental Disabilities if any : _____

Family Doctor's Name & Contact No. : _____

Allergies, if any : _____

* Admissions are subject to medical fitness test by the school.

* If any discrepancy / deficiency is found at a later stage, the admission will be cancelled.

22. Siblings (own brother / sister) studying in this school :

Class & Section	Name	Admn. No.

23. FAMILY DETAILS

DESCRIPTION	FATHER	MOTHER
Name (as per Municipal record)		
Nationality		
Qualification		
Profession / Designation		
Name & Address of the office		
Annual Income (In Rupees)		
Transferable Job	Yes / No	Yes / No
Aadhar Card Number		
E-mail Address		
Residence Tele No.		
Office Tele. No.		
SMS to be sent to Mobile No. : (Only one number to be provided)		

Note : 1) The details should be provided in a separate sheet with proof by the guardian, in case he applies for the child's admission.

2) Any change in address & phone numbers should be intimated to the School immediately.

24. You have come to know about this School through Newspapers Friends Website

25. Declaration by Parent / Guardian

We understand fully that the school on accepting this application fee and registering the name, is not in any way bound to provide an admission. We agree to abide by the school rules and regulations concerning registration, school fee revision, admissions and withdrawal or dismissal of the student including discipline matters in the event of our ward being given an admission in the school.

We state that all the information given in this application form is true to the best of our knowledge and in case at any stage the information provided herein is found to be false/incorrect, our ward's admission can be cancelled.

We state that we will follow the rules and regulations as mentioned in the prescribed format (Annexure A,B & C).

We undertake to follow the rules as stipulated in the school Almanac.

- Note :
1. Incomplete application form will not be considered for admission.
 2. Admission is subject to medical fitness of the child.
 3. A minimum yearly increase 10% to15% is to be expected on the fees structure.

Signature of Father

Signature of Mother

Signature of Guardian

Date : _____

Photocopies of Documents enclosed

- 1) Date of Birth Certificate (Panchayat/Municipal Corporation)
- 2) Aadhar Card (Father, Mother and Child)
- 3) Transfer Certificate (Original)
- 4) Previous School Report
- 5) Residential Address Proof (Present Stay)
- 6) Blood group report of the child
- 7) Certificate of caste / Physically Challenged (SC/BC/ST/PC)
- 8) Guardian Certificate
- 9) Other certificates, if any

OFFICE USE

OFFICE USE				
Admitted or Not admitted	Admn. No.	Official's name, Sign & Date	Admin. Register Entry	Principal Sign & Date
			Yes / No	

CHECK LIST FOR REGISTRATION

1. Age as on 31st March should be 3 years. **(Born between 01-04-2013 to 31-03-2014 for LKG)**
2. Completed Application Form.
3. Passport size photos of the student and both the Parents should be pasted in the form.
4. Copy of Birth Certificate from Panchayat / Municipal Corporation.
(Bring original certificate for verification and it will be returned).
5. If sibling case (own brothers and sisters), Xerox copy of sibling's school ID card has to be enclosed.
6. Guardian certificate (if applicable).
7. Certificate of caste / Physically Challenged (SC/BC/ST/PC) (if applicable).
8. Copy of residence proof of present status (like Telephone bill, Electricity Bill, Passport).
9. Copy of Aadhar Card (Child, Father, Mother).
10. Blood group report of the child

Note: 1) Incomplete application forms will not be considered for admission.
2) Item no 1 to 7 has to be submitted compulsorily at the time of registration and other items can be submitted at the time of Registration / Admission.

Acknowledgement

Application No : Reg. No

Name of the student : _____

Name of the father : _____

Date of submission of Application form : _____

Date of Interaction : _____

Time of reporting : _____

Note: Incomplete application forms will be not be considered for admission.

Both the Parents along with the child should attend the interaction.

The process time for interaction will be around 2 to 3 hours from the time of report.

Signature of the issuing Official