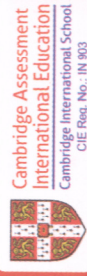




Luxor World School

UNIVERSITY OF CAMBRIDGE INTERNATIONAL EXAMINATION UK
Day / Residential School



Emerald Valley, Kallikkampatti Post, NH-7, Madurai Road, Dindigul - 624 303
Ph : 73739 19170, 73739 19198, 85261 35135 E.mail : luxorworldschool@gmail.com, w/s: www.luxorworldschool.in



APPLICATION FOR ADMISSION

(Please Complete the form Clearly in BLOCK LETTERS)

Admission No. _____

Seeking Admission into Grade : _____ Boarder / Day Scholar : _____

LEARNER'S PERSONAL DEMOGRAPHY

Name : Middle Name Surname / Initial Expanded

(As per previous school records) First Name

Date of Birth (in Figures) (dd/mm/yyyy)

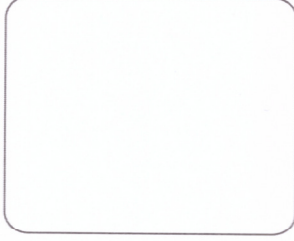
Age as on 1st June 20 -- -- Years & Months

Gender : Male Female Place of Birth

Blood Group : Nationality

Religion : Mother Tongue :

Passport No. : EMIS No.



PHOTO

(No change in Name & Date of birth will be accepted later)

DETAILS OF THE PARENTS / GUARDIAN

Name of Father / Guardian |

Educational Qualifications |

Occupation Salaried Professional Self Employed Others

Name of Mother / Guardian |

Educational Qualifications |

Occupation Salaried Professional Self Employed Others

DOES THE CHILD NEED SCHOOL TRANSPORT Yes No

ADDRESS

Permanent Address |

Postal Address for Correspondence |

Distance (in km) from School | Pin Code |

Phone : Office | Residence | STD Code |

E-mail ID | Mobile |

Details of Siblings (Brothers / Sisters)

Name	Grade	Present School
i)		
ii)		
iii)		

Educational Background

The school in which the student is currently attending or which he / she has last attended

Name of the School	Grade	Period	
		From	To

Emergency Contacts

Name, address and relationship of the person / local guardian to be contacted in emergency :

Name : _____ Relationship : _____
Address _____
E.mail ID _____ Mobile No. : _____
Phone : Office : _____ Residence : _____
Town : _____

Undertaking of Fee Responsibility by Parents

Name, address and relationship of the person responsible for payment of school dues, must sign the undertaking appended below,

I father / mother of (Name of Child)
hereby undertake to pay all school dues from time to time in advance, or whenever asked for, by the school authorities, in respect of my ward.

Date :

Signature of the Parent

Undertaking in Respect of Boarder Student

I understand that no change of status from Boarder to Day scholar in respect of my ward will be permitted under any circumstances.
son / daughter of

will be permitted under any circumstances.
I also understand that if I wish to change my ward's status any time, I will have to withdraw my child / ward and seek re-admission as per the school procedure for admission.

Date :

Signature of the Parent

Student details (For Overseas Candidates)

(a) Nationality

(b) Passport No.

(c) Date of Issue

(d) Passport issuing Authority and place of Issue

(e) Visa

Valid upto

NOTE

Admission is provisional, unless Previous School Leaving Certificate is submitted.

At least three month's notice or fee in lieu of notice is to be paid if you wish to withdraw your son / daughter from the school.

CHECK LIST OF ATTACHMENTS

- A Copy of Birth Certificate Conduct Certificate
- A Copy of Community Certificate 3 Passport Size Photographs
- Original Transfer Certificate 2 Stamp Size Photographs
- Passport Blood Group Certificate
- Vaccination Certificate (against Chicken Pox / Polio / Hepatitis / A, B, C Typhoid, Etc.,)

*(The Originals should be brought along while submitting the filled in Application Form.
They will be returned promptly after due verification)*

DECLARATION

I agree that each part of the application and the information provided herein has been carefully read and is true and correct. I understand and agree to comply with the rules & regulations of the school, the fees charged, the curriculums implemented and the management's right to implement changes to the curriculum implemented, fees and decisions on admission of my child in **Luxor World School, Dindigul**. We know that the school reserves all rights to click and use photographs of our ward in any print and electronic media without taking any permission from us.

Place : _____

Signature

Date : _____

(Father / Mother / Guardian)

FOR OFFICE USE

Received a sum of.	School Receipt No.	Dated
by Cash/Draft or Cheque No.	Dated	on
Name of bank		

ADMISSION No.

Signature of Cashier

Admit	House	as Boarder / Day Schoar
In Class		
with effect from		

Principal