



# THE INDIAN CAMBRIDGE SCHOOL

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FORM -B

SESSION:2024-25

## APPLICATION FORM FOR ADMISSION

<THIS FORM MUST BE FILLED IN CAPITAL LETTERS (BLUE/BLACK INK ONLY)>

FULL NAME OF THE STUDENT

DATE OF BIRTH

ADMISSION NO.

Date of Birth (in words): \_\_\_\_\_

CLASS TO WHICH ADMISSION IS SOUGHT: \_\_\_\_\_ LAST CLASS PASSED: \_\_\_\_\_

PREVIOUS SCHOOL'S NAME: \_\_\_\_\_

PASTE HERE  
A RECENT  
COLOURED  
PASSPORT SIZE  
PHOTOGRAPH  
OF THE STUDENT  
**DO NOT STAPLE**

SOCIAL CATEGORY:  SC  ST  OBC  GENERAL

[Note: if the candidate belongs to SC, ST or OBC category, It is mandatory to provide an attested copy as proof at the time of admission or else the child's social category will be considered as General]

NATIONALITY: \_\_\_\_\_ RELIGION: \_\_\_\_\_ AADHAR NUMBER: \_\_\_\_\_

STATUS:  Day Scholar  Boarder BLOOD GROUP: \_\_\_\_\_

FATHER'S / LEGAL GUARDIAN'S NAME: \_\_\_\_\_

FATHER'S MOBILE NUMBER: \_\_\_\_\_ AADHAAR NUMBER: \_\_\_\_\_

FATHER'S EMAIL ID: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_

MOTHER'S MOBILE NUMBER: \_\_\_\_\_ AADHAAR NUMBER: \_\_\_\_\_

MOTHER'S EMAIL ID: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

FAMILY ANNUAL INCOME: \_\_\_\_\_

### FOR BOARDING STUDENTS

DIETARY PREFERENCE FOR BOARDERS:  NON-VEGETARIAN  VEGETARIAN

VISITOR'S LIST – The following persons are allowed to visit my child

| Name | Relationship | Address | Contact Number |
|------|--------------|---------|----------------|
| 1.   |              |         |                |
| 2.   |              |         |                |
| 3.   |              |         |                |
| 4.   |              |         |                |
| 5.   |              |         |                |

\_\_\_\_\_  
Father's Signature & Date:

Affix stamp  
size photo  
here

\_\_\_\_\_  
Mother's Signature & Date:

Affix stamp  
size photo  
here

**FOR OFFICE USE ONLY**

ADMISSION NO. 

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FULL NAME OF STUDENT: \_\_\_\_\_

CLASS: \_\_\_\_\_ SECTION: \_\_\_\_\_ STREAM: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ BLOOD GROUP: \_\_\_\_\_

DATE OF BIRTH (in words): \_\_\_\_\_ AADHAAR NO. OF CHILD: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ MOTHER'S NAME: \_\_\_\_\_

DATE OF ADMISSION: \_\_\_\_/\_\_\_\_/\_\_\_\_

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| PASTE HERE<br>A RECENT<br>COLOURED<br>PASSPORT SIZE<br>PHOTOGRAPH<br>OF THE STUDENT<br><b>DO NOT STAPLE</b> |
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SIGNATURE OF PRINCIPAL: \_\_\_\_\_

## **DECLARATION BY THE PARENT/GUARDIAN**

- 1) I desire that my ward may be admitted as Day Scholar / Boarder at The Indian Cambridge School, Dehradun and I hereby agree to abide by the rules & regulations of the school. I also agree to the monetary terms & conditions of the School.
- 2) I hereby state that the school management or any of its Functionaries will not be held responsible in any way whatsoever if my ward is involved in any accident within the school premises or at a camp/picnic site while traveling by bus or train or any other mode of transportation.
- 3) In case I wish to withdraw my child in mid of the session, advance notice period of three months will given. If prior notice is not given, three months of fee will be charged in lieu of the notice period.
- 4) Registration & Admission charges will not be refunded in the event of cancellation of admission or withdrawal of the child once admission is sought.
- 5) I understand that any error in the information furnished in this application will make the Admission invalid.
- 6) I am aware that admission is the sole discretion of the principal whether to grant or reject admission request of the candidate.
- 7) In case I do not want to continue my ward in new session, I shall apply for **Transfer Certificate (TC)** in writing one month prior to the beginning of the next session i.e., latest by **10<sup>th</sup> of March**.

Relationship with the child: \_\_\_\_\_ Parent's/ Legal Guardian's Signature with date \_\_\_\_\_

Kindly (✓) the documents enclosed:

Birth Certificate

Transfer Certificate

Photocopy of AAADHAAR Card of the Student

Copy of proof of Social Category (ST/ SC/ OBC)

Photocopy of AAADHAAR Card of both the Parents

Blood Group report of Child

Medical Fitness Certificate

Progress Report of Previous Class Passed

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| PASTE HERE A RECENT<br>COLOURED PASSPORT SIZE<br>PHOTOGRAPH OF THE<br>STUDENT WITH PARENTS<br><br><b>DO NOT STAPLE</b> |
|--|

Date of Admission: \_\_\_\_\_

Signature of Principal with Date: \_\_\_\_\_