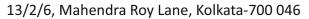


+91 8981311766

## **APPLICATION FORM FOR ADMISSION 2023-24**

## **BYPASS UNIT**



🖄 Email: jibreelinternationalschool@gmail.com | @Website: www.jibreelinternationalschool.com



				_					_										,						_	
	Affix a passport size photograph of the student										Affix a passport size photograph of father											Affi asspo otog mot	rt si raph			
	REGISTRATION NO.										CLASS APPL							PPLI	JED FOR:							
	STUDENT'S DETAILS																									
STU	STUDENT'S NAME:																									
DATE OF BIRTH:			GENDER: MALE FEMALE																							
SOCIAL CATEGORY:			MOTHER TONGUE:																							
NATIONALITY:											BLOOD GROUP:															
MOBILE NO.:			SECOND LANGUAGE:																							
AAD	AADHAAR NO.:																R	ELIC	SION	۱:						
PLAC	LACE OF BIRTH:																									
.AST	AST SCHOOL:																									
	DOES THE STUDENT HAVE ANY SIBLING IN THIS SCHOOL?																									
	S. No.	Name								Adm No.			lo.	Class & Sec.					. Presently studying in							
	1														1											
	2																									
RESIDENTIAL ADDRESS:											7															
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## PARENT INFORMATION

		FATH	IEF	R	MOTHER						
а	Name										
b	Qualification										
С	Occupation / Profession										
d	Organization										
е	Official Address										
f	Mobile No.										
g	Email Id										
h	Annual Income										
	Guardian Name:	GUARDIAN	INI	FORMATION							
R	elation:			Qualification:							
	Occupation:			Telephone No.:							
Α	ddress:										
N	Nobile:			Email Id:							
	es your child have any medical edical Details:	-									
shall	nereby certify that the above informa be automatically disqualified from	om Selection/Admissi	is o	correct, if the information without any correct.	<b>V</b> ation is found to be incorrect or false, the ward respondance. I/We understand that the e rules and regulations of the institution.						
Date:	Sign. of the F	ather _	S	ign. of the Mothe	Sign. of the Guardian						
	DOCUMENT	S TO BE SUBMITTED	) A	T THE TIME OF IN	ITERVIEW						
•	Two passport size student's and Photocopy of Birth Certificate Photocopy of Aadhaar Card. Photocopy of the Report Card Original Transfer Certificate. Photo Identity and address photocopies of qualification of	e. d of the previous sch roof of parents.	100								

FOR OFFICE USE ONLY

Receipt No.: \_\_\_\_\_ Date: \_\_\_\_\_

Rejected / Admitted to Standard: \_\_\_\_\_

Note: Please carry original documents for physical verification.