



# SPACE ENGLISH MEDIUM SCHOOL

Affiliation No.: 430286

School No.: 10267

**AFFILIATED TO CENTRAL BOARD OF SECONDARY EDUCATION(CBSE), NEW DELHI**

Near Shantivan Ashram, Space Road, Sardar Chowk, Jetpur - 360 370

Cell : 9898502877 | Email : spacegroup.office@gmail.com

## ADMISSION FORM

Application No. \_\_\_\_\_

CBSE Grade Guides

Nursery

LKG

HKG

Admission required for (Please mention the relevant grade) : .....

Affix recent  
passport size  
colour photograph

## Student Information

Name \_\_\_\_\_

(As per previous school records)

Gender: Male ☐ Female ☐ Date of Birth         Place of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_ Religion: \_\_\_\_\_

Caste: \_\_\_\_\_ Mother Tongue: \_\_\_\_\_

Passport No: \_\_\_\_\_ Place of Issue: \_\_\_\_\_ Validity \_\_\_\_\_

Hobbies: \_\_\_\_\_ Sports: \_\_\_\_\_

Other Interests: \_\_\_\_\_

## Residential and Communicational Address

House Number or Building Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Pin Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Preferred phone number for school SMS: \_\_\_\_\_

| Emergency Contact No. (Res/Mobile) | Name of the person to be contacted | Relationship |
|------------------------------------|------------------------------------|--------------|
|                                    |                                    |              |
|                                    |                                    |              |
|                                    |                                    |              |

## Enclosures

- ☐ Birth Certificate
- ☐ Transfer Certificate
- ☐ Medical Form
- ☐ Blood Group Report
- ☐ Passport Size Photos of Child (5 copies)
- ☐ Passport Size Photos of Parents (2 Each)
- ☐ Aadhar Card Copy of Parent & Child
- ☐ Copies of Progress Report Cards for the latest year (If applicable)
- ☐ Community Certificate : For Scheduled Castes Scheduled Tribes or Backward Communities
- ☐ Character / Conduct Certificate

**Please Note:** Staple all documents to the top left-hand corner of the application

### DECLARATION

I hereby declare that the information furnished in this form is true to the best of my / our knowledge and belief.

Date:

Place:

Signature of the Parent / Guardian's

Affix  
recent passport-size  
colour photograph  
of Mother

Affix  
recent passport-size  
colour photograph  
of Father

Affix  
recent passport-size  
colour photograph  
of Guardian

## FOR OFFICE USE ONLY

**Admit to Grade:** \_\_\_\_\_ **Roll. No. Allotted:** \_\_\_\_\_

**Date of Joining:**

|   |   |
|---|---|
|   |   |
| D | D |

|   |   |
|---|---|
|   |   |
| M | M |

|   |   |   |   |
|---|---|---|---|
|   |   |   |   |
| Y | Y | Y | Y |

**Principal's Remarks** \_\_\_\_\_

**Chairman's Remarks** \_\_\_\_\_

**Documents Submitted:**      **Originals**      **Photocopy**

|                       |                          |                          |
|-----------------------|--------------------------|--------------------------|
| Marks Sheet           | <input type="checkbox"/> | <input type="checkbox"/> |
| Transfer Certificate  | <input type="checkbox"/> | <input type="checkbox"/> |
| Migration Certificate | <input type="checkbox"/> | <input type="checkbox"/> |
| Conduct Certificate   | <input type="checkbox"/> | <input type="checkbox"/> |

**Seal & Signature**

**Remarks:** \_\_\_\_\_

## Family Information

**Mother's Name:** \_\_\_\_\_

Qualification(s): \_\_\_\_\_ Profession: \_\_\_\_\_

Name of Organisation & Designation: \_\_\_\_\_

Business (if applicable): \_\_\_\_\_

Ph: \_\_\_\_\_ Mobile: \_\_\_\_\_

E-mail: \_\_\_\_\_ Annual Income: \_\_\_\_\_

**Father's Name:** \_\_\_\_\_

Qualification(s): \_\_\_\_\_ Profession: \_\_\_\_\_

Name of Organisation & Designation: \_\_\_\_\_

Business (if applicable): \_\_\_\_\_

Ph: \_\_\_\_\_ Mobile: \_\_\_\_\_

E-mail: \_\_\_\_\_ Annual Income: \_\_\_\_\_

**Guardian's Name:** \_\_\_\_\_

Qualification(s): \_\_\_\_\_ Profession: \_\_\_\_\_

Name of Organisation & Designation: \_\_\_\_\_

Business (if applicable): \_\_\_\_\_

Ph: \_\_\_\_\_ Mobile: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Student is living with**      Both Parents ☐      Mother ☐      Father ☐      Guardian ☐

### Details of Siblings

| Name | Age | Institution Studying in | Grade |
|------|-----|-------------------------|-------|
|      |     |                         |       |
|      |     |                         |       |

## Previous Education

Name and address of previous school

| Institution | Grade | Year of Completion |
|-------------|-------|--------------------|
|             |       |                    |
|             |       |                    |

Grade completed before entry to SEMS \_\_\_\_\_ Medium of Instruction \_\_\_\_\_

The school is affiliated to: SSLC ☐ CBSE ☐ ICSE ☐ Others (specify) ☐ \_\_\_\_\_

Languages the student has previously studied:

Second language: \_\_\_\_\_ From Grade: \_\_\_\_\_ to \_\_\_\_\_

Third language: \_\_\_\_\_ From Grade: \_\_\_\_\_ to \_\_\_\_\_

Scholastic Achievements: \_\_\_\_\_

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Non Scholastic Achievements: \_\_\_\_\_

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### Additional Information

What are your long term plans for your child? \_\_\_\_\_

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Reasons for seeking admission to Space English Medium School: \_\_\_\_\_

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Any other information you wish to mention? \_\_\_\_\_

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