



# BAI DHUNMAI CAWASJI HIGH SCHOOL & JUNIOR COLLEGE

Pune - Mumbai Highway, Khandala - 410 301 (Dist. Pune)

## Pre Primary / Primary / Secondary

01. Name :

\_\_\_\_\_ ( First Name ) ( Middle Name ) ( Surname )

Male

Female

02. Date of Birth :

Date

Month

Year

In Words : \_\_\_\_\_

03. Birth Place :

\_\_\_\_\_

Blood Group :

\_\_\_\_\_

04. Nationality :

\_\_\_\_\_

Religion :

\_\_\_\_\_

Caste :

\_\_\_\_\_

( Caste Certificate Attached : Yes

No

)

05. Class in which Presently Studying :

\_\_\_\_\_

06. Name of the Last School :

\_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

07. Reason For Leaving Previous School :

\_\_\_\_\_

08. To be admitted to Std. :

\_\_\_\_\_ as Boarder

Dayscholar

09. Name of Father \_\_\_\_\_

Educational Qualifications : \_\_\_\_\_

Profession / Occupation : \_\_\_\_\_

10. Name of Mother : \_\_\_\_\_

Educational Qualifications : \_\_\_\_\_

Profession / Occupation : \_\_\_\_\_

11. Permanent Address :

Present Address :

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Pin Code \_\_\_\_\_

Phone \_\_\_\_\_

Pin Code \_\_\_\_\_

Phone \_\_\_\_\_

( P.T.O. )

12. Name & Address of Guardian :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Phone No. : \_\_\_\_\_

**Declaration By The Applicant :**

We / I hereby certify that the information given herein is correct to the best of our / my knowledge and belief. We / I have not suppressed any material fact or factual information in the above application. We / I have read the rules and regulations as laid down in the School Prospectus and agree to abide by them. In case We / I have given wrong information or suppressed any material fact or factual information, then our / my child may be dismissed from the school without notice or reason there of.

Signatures :            Father : \_\_\_\_\_  
                                 Mother : \_\_\_\_\_  
                                 Guardian : \_\_\_\_\_

Date : \_\_\_\_\_ Place : \_\_\_\_\_

**FOR OFFICE USE ONLY**

Interviewed on \_\_\_\_\_ and admitted to Std. \_\_\_\_\_ as

Boarder  Day Scholar  for the Academic Year \_\_\_\_\_

Date : \_\_\_\_\_ HOD \_\_\_\_\_ Principal \_\_\_\_\_

**Documents Check List :**

- A. Birth Certificate : \_\_\_\_\_
- B. School Leaving Certificate : \_\_\_\_\_
- C. Progress Card : \_\_\_\_\_
- D. Medical Fitness Certificate : \_\_\_\_\_
- E. Blood Group Report : \_\_\_\_\_
- F. Xerox of Passport ( if applicable ) : \_\_\_\_\_
- G. 3 Passport size Photographs : \_\_\_\_\_

Checked By : \_\_\_\_\_



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1. Name of Student : \_\_\_\_\_
2. Domitory : \_\_\_\_\_
3. Date of Birth : \_\_\_\_\_ Blood Group : \_\_\_\_\_
4. Date of Admission \_\_\_\_\_ Standard \_\_\_\_\_

**FATHER'S / MOTHER'S / GUARDIAN'S NAME / ADDRESS / TELEPHONE NO.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CONTACT IN EMERGENCY**

Name \_\_\_\_\_ Tel. No. \_\_\_\_\_

**ANY SPECIAL INSTRUCTION LIKE VISITORS, PROCEEDING ON VACATION, MEDICAL, TUITION ETC.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent's Signature \_\_\_\_\_

Dorm. Incharge Sign. \_\_\_\_\_

H.O.D.

Secretary



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**RULES & REGULATIONS FOR REFUND OF DEPOSIT**

1. A clear notice of three months must be given for withdrawal of the student and refund of Deposit, failing which all dues will be recovered for 3 months.
2. Any children leaving the school must pay fees till the end of current academic year
3. In case the student is expelled due to gross act of indiscipline the Deposit will stand forfeited
4. In case of withdrawal on medical grounds, request for refund of Deposit may be entertained in exceptional cases solely at the discretion of management.
5. Fees or other dues will NOT be adjusted against Deposit.
6. Premature refund of Deposit will not be accepted
7. All Deposits will be paid for a Lock in Period of 36 months NO request for refund of Deposit will be entertained during this lock in period. At the end of the said 'LOCK IN PERIOD' the rules of refund of Deposit as given above will be applicable.
8. The Security Deposit will be refunded only to the person in whose name Receipt for this is issued.
9. I have read, understood and accept the above rules

Signature of Parent / Guardian

(Name : \_\_\_\_\_)