



# GLOBAL INDIAN INTERNATIONAL SCHOOL

Near Shikargarh Palace, Shri Yade Nagar, Nandra Kalla, Shikargarh, JODHPUR-342027 (Raj.)

E-mail: giisjodhpur@gmail.com Website: www.giisjodhpur.com Phone: +91 9772222622

## ADMISSION FORM

D.O.A. : Date..... Month..... Year.....

In words.....

Admission No..... (to be filled by office)

CLASS to which admission sought..... Session.....

Stream & Subjects (if applicable).....

PEN: ..... AADHAR No.: .....

Category: General/SC/ST/OBC/EWS

Photo  
with  
Date

### PERSONAL DETAILS:-

1. Name:.....

2. Gender: Male  Female  Any other

3. D.O.B. : Date..... Month..... Year.....

In words.....

(Attach Date of Birth Certificate issued by the Competent Authority)

4. Details of parents:

| Details                   | Mother | Father / Guardian |
|---------------------------|--------|-------------------|
| Name                      |        |                   |
| Educational Qualification |        |                   |
| Residential Address       |        |                   |
| Contact No.               |        |                   |
| E-mail                    |        |                   |
| Occupation                |        |                   |



10. Transfer Certificate Details\*:

Transfer Certificate No..... Date of issue.....

11. Details of siblings (if any)

|      | Brother / Sister | Class | School studying in |
|------|------------------|-------|--------------------|
| Name |                  |       |                    |
| Name |                  |       |                    |
| Name |                  |       |                    |

**DECLARATION**

I hereby declare that the above information including Name of the Candidate, Father's / Guardian's Name, Mother's name and Date of Birth furnished by me is correct to the best of my knowledge & belief. I shall abide by the rules of the School.

Date.....

Signature of the Parent(s) / Guardian

Place.....

Relation with candidate.....

Correct entries from the Admission Forms to Admission and Withdrawal Register have been made on page no..... on dated.....

Signature of the Principal

\* In case, student is from other board, Transfer Certificate should be countersigned by the Competent Authority.

## Registration Data for Classes- 9 to 12

Registration No. (Applicable for Class X / XII): .....

Name of Candidate: .....

Mother's Name: .....

Father's Name: .....

Gender (Male / Female): .....

Date of Birth: .....

Category (Gen / SC / ST / OBC): ..... (Attach Proof)

Do you belong to Minority Section (Muslim / Christian / Sikh / Jain)? (NA / YES / NO) Please mention: .....

Person with Disability (PwD)? (NO / Visual Impairment / Hearing Impairment / Locomotor Disability / Dyslexic / Spastic / Autistic): ..... (Attach Proof)

Mobile No: .....

Email ID: .....

Aadhar No: ..... (Attach Proof)

Subjects: .....

Annual Income: .....

Details of Sec / Equivalent Exam Passed: Roll No. .... Year.....

Exam (SSE / SSCE / Secondary / NIOS / ICSE / IB / OTHERS).....

Board.....

Only child of the parents (YES / NO): .....

SR No. & Date of Admission (To be filled by Office): ..... : .....