



SHANTI NIKETAN PUBLIC SCHOOL

(Affiliated to : Central Board of Secondary Education, New Delhi)

(A Residential cum Day Schlor's School)

Campus : NH-3 Agra-Gwalior Road, Tehra, Agra-282001

Corporate Office : 2/363, Mall Road, Pratap Pura Crossing, Agra - 282001

REGISTRATION CUM ADMISSION FORM

Application No.

Affix Students
Passport Size
Photograph

ADMISSION : RESIDENTIAL DAY SCHOLAR

USE BLOCK LETTERS

Student Name
(As per previous school records)

Admission to Grade /Standard	NUR.	<input type="checkbox"/>	LKG	<input type="checkbox"/>	UKG	<input type="checkbox"/>	I	<input type="checkbox"/>	II	<input type="checkbox"/>
	III	<input type="checkbox"/>	IV	<input type="checkbox"/>	V	<input type="checkbox"/>	VI	<input type="checkbox"/>	VII	<input type="checkbox"/>
	VIII	<input type="checkbox"/>	IX	<input type="checkbox"/>	X	<input type="checkbox"/>	XI	<input type="checkbox"/>	XII	<input type="checkbox"/>

Languages 2nd Language (for Standard III to X)

Hindi Sanskrit English

3rd Language (for Standard III to VIII)

Hindi Snaskrit English

Stream & Combination
of Subject for XI & XII

(in case of XI & XII admission)

Science

PCMB

PCMBT

PCMC

PCMPE

PCBPE

Commerce

EABM

EABIP

EABEn

EABH

EABS

Particulars of the Student

USE BLOCK LETTERS ONLY

Student Name

(As per previous school records)

Sex MALE FEMALE

Age Date of Birth DD MM YYYY

Place of Birth District

State Mother Tongue

Religion Nationality

Whether belonging to Schedule Caste / Scheduled Tribe YES NO

Name & address of previous schools along with dates

	Institutions	Grade	Year of Completion
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>

Reason for withdrawal from previous school

<input type="text"/>
<input type="text"/>
<input type="text"/>

Scholistic achievement / percentage in the class

<input type="text"/>
<input type="text"/>
<input type="text"/>

Form or Grade completed before entry into SNPS

<input type="text"/>
<input type="text"/>

Sports, Games and Activities - (Any Achievements):

<input type="text"/>
<input type="text"/>

Interests and Hobbies - (Any Achievements) :

Music (Vocal / Instrumental & years of learning) -(Any Achievements):

Is there any evidence of learning disability :

(If yes, attach full explanation)

YES

NO

Health and physique: Any allergies, history of asthma, epilepsy, diabetes or other major illness or physical disability should be annotated here.(see separate Medical forms)

Character - Any specific areas where counselling is needed.

Attainments:

Any special areas of development sought:

Careers Considered:

General Remarks:

Particulars of the Family

Fathers Name

Qualification Occupation

Birthday Age

Mother's Name

Qualification Occupation

Birthday Age Wedding Day

Sibling's Name-1 Age Sex

-2 Age Sex

Weather Studying? School College

(If Yes, Class/Standard)

Residential Address

Pin

Telephone(Resi) Mobile

(With STD Code)

Office Email

Nearest Railway Station

Correspondence Address

Pin

Telephone(Resi) Mobile

(With STD Code)

Office Email

Nearest Railway Station

Local Guardian's
Name & Address

Pin

Telephone(Resi)
(With STD Code)

Mobile

Office

Email

Nearest Railway
Station

Recommended by

Signature of Student

Signature of Parent/Guardian

FOR OFFICE USE ONLY

Admit to Grade/Standard

NUR LKG UKG I II III IV V
VI VII VIII IX X XI XII

Roll. No. Allotted

Date of Joining

DD

MM

YYYY

Principal Remarks

Chairman Remarks

Document Submitted

Original

Photostat

Transfer Certificate(TC)

Mark Sheet

Migration Certificate

Conduct Certificate

Photographs

Yes

No

Any Other Documents

MEDICAL FORM

(FOR OFFICE USE ONLY)

Student's Name (USE BLOCK LETTERS ONLY)
As per previous School Record

Sex Male Female **Age**

Standard to Which Admitted **Blood Group**

Height **Weight**

Name of Parent & Correspondence Address

 Pin

Telephone(Resi) **Mobile**
(With STD Code)
Office **Email**

Nearest Railway

Local Guardian Name And Address

 Pin

Telephone(Resi) **Mobile**
(With STD Code)
Office **Email**

Nearest Railway

Infectious Diseases (Please underline the disease(s) your child has Had)Station

Measles - German Measles - Scarlet Fever - Chicken Pox - Mumps - Whooping Cough - Epidemic viral Hepatitis - Malaria- Typhoid Fever - Poliomyelitis - Tetanus - Diptheria - Meningitis - Endocarditis- Mononucleosis (Glandular fever) - Toxoplasmosis, TB, Pulmonary Diseases / Primary Complex etc.

Other Illness (Please underline)

Recent exposure to any other contagious / infectious disease (give details).

Respiratory - **Frequent tonsillitis - Otitis (Ear infection), Bronchitis - Asthma - Sinusitis - Epistaxis**

Digestive - **Gastric - Digestive - Intestinal complaints**

Heart & Circulation - Congenital or acquired heart diseases - Peripheral Circulatory troubles (chilblain or others)

Blood Anemia - Prolonged bleeding - Capillary fragility or other trouble.

Nervous - Epilepsy - Tetanus - Disorders of character-Migraine.

Joints & Bones- Rheumatic illness - Trauma requiring special attention

Endocrine - Diabetes - Thyroid and Parathyroid problems or other

Metabolism - Obesity - Failure to thrive - Other problems

Skin (Epidermic)- Eczema - Urticaria - other contagious or non-contagious skin Diseases - Fungal infection.

Allergies - Drug - Foods - Odours - Chemical Products - Plants Dust (Pollen) - Hair - Feathers or Others

Urinary - Kidney trouble - Bladder : Cystitis - Enuresis / Kidney Stones

Genital - Eg. Incapacitating periods or other troubles
(Concerns mostly girls)

Teeth - Condition of Teeth - necessary care or supervision / Braces

Glasses or Contact lenses If spectacles are worn, please supply three sets....

Date of most recent Illness

Particular wishes of the parent:

Please state whether the child is fit and able to participate in sports and expeditions. If not, please give

1. Medical Certificate

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2. Concise physical Report

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Supplementary remarks & information (send analysis, x-rays, Medical Reports. etc.)

Clinical Evaluation - Health Certificate

Blood Group

Signature of Medical Practitioner /
Physician with seal & Regn. No.

Place

Date

Supplementary
Information

UNDERTAKING BY PARENTS

UNDERTAKING - 1

(To be signed and returned with the Application Form by the Parent)

I understand that my son/daughter is granted admission to Shanti Niketan Public School on the following terms and conditions:

Transfer/Leaving Certificate

- That I am required to deposit the Transfer/Leaving Certificate from the previous school within 15 days of his/her joining the School, failing which the Principal will have the right to cancel the admission.
- In case of non-submission of the Transfer/Leaving Certificate for whatsoever reason and my child is not allowed to appear for the Board Examination, I will not hold the School responsible for the same.

Fees

- That I am to deposit the fees in full on or before the date the child is to join the School.
- That there will be no refund of fees if the child is withdrawn from the school for whatsoever reason.
- That in case a child is withdrawn in the middle of an academic year, for whatsoever reason, I will pay the full fees for the entire academic year.

Leave

- That I have studied the leave rules of the Institution. I agree to the conditions that leave will not be sanctioned to the students for the following:
 - A) To attend religious or personal functions, such as Raksha Bandhan, Birthday celebration etc.
 - B) On the illness of relatives.
 - C) To attend marriage of relatives.
- Extra Ordinary Leave will be granted for two days only once in a year, apart from the journey time for the following:
 - A) To attend the marriage of blood brothers/sisters or that of parent's brother's or sister's children (Wedding card should be attached to the leave application).
 - B) To offer condolences upon the demise of immediate relations.
- I will provide transport from the School to the Airport / Railway Station and vice versa when my ward(s) avails such leave.
- Leave will not be sanctioned during the Examination period.
- I also understand that no leave will be granted to the student unless I apply for it directly to the Principal, at least 7 days in advance.

Discipline

- That if my ward leaves the school campus without permission, the school authorities may lodge an F.I.R. with the Local Police Station and I will have no right to question and raise objections to this action. The school will not be responsible for any mishap in such circumstances. My ward may be considered for re-admission only after satisfactory explanation in writing from me and my ward, for his leaving the campus and after paying a fine of Rs.5000/-. Re-admission of my ward will be at the discretion of the Principal

- That the student is liable for removal from the School for

<ul style="list-style-type: none"> a) Immorality c) Stealing or extortion of money/items from e) Bullying, assaulting and ragging in any form g) Using of any word or action likely to damage/undermine the reputation of the institution. i) Conduct harmful to other students k) Damaging school property 	<ul style="list-style-type: none"> b) Grave insubordination. d) Contempt of authority other students f) Using unfair means in any examination. h) Consistent unsatisfactory progress j) Breaking bounds l) Non-payment of school dues.
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- That no eatables will be sent to the student.
- That the student will not be given any cash. Any money required for the student will be sent to the School Office.
- That no valuables like gold chains, rings, transistors, personal stereo systems etc are to be given to the student and that the School does not take responsibility for the loss of any such valuables. No types of cell phones (Mobiles) are to be given to the students. Any cell phones (Mobile) given to / found with the student will be confiscated and a fine of Rs. 25,000/- will be imposed.
- Any disciplinary action taken against my child by the school will be binding on me and I will not represent against such action.

Medical Aid/Accidents

- That the School will do its best to provide normal medical aid, but the school will not be held responsible for any untoward incidents/mishaps/accidents despite its best efforts. This applies also to all accidents which may occur in the science-laboratories, workshops, sports fields, gymnastics, boxing, rock climbing, trekking, mountaineering, microlite flying, Para sailing, swimming, educational tours or journeys to and from the school.

Telephone

- Parents may call the Child/Children once in fifteen days and e-mail at any time.

Dress Code

- That my child will follow the Dress Code of the School, which is as under:
 - A) Tight and Transparent outfits are not allowed
 - B) Dress sense should be based on comfort, appropriateness and tastefulness of choice, rather than trends of fashion and the desire for display.
 - C) Girls are not allowed to wear sleeveless, spaghetti tops, transparent and tight T-Shirts.
 - D) Clothes and T-Shirts with risqué prints or symbols are also not allowed
 - E) Children will only wear the uniforms/shoes approved by the School

General

- That the parents are permitted to take the child out of the school campus for a weekend once in September and once in January/February on Saturday afternoon and drop them back to the School before 7 AM on the following Monday.
- That during July and August, parents must avoid visiting the School in order to help the child/children to settle down in the new environment and make friends and cultivate feelings of the school being a 'home away from home'.
- That the parents should avoid visiting the child/children during the months of key-stage and final examinations.
- That promotion to the next higher class is not automatic and that promotion is granted at the end of the Annual examination only in accordance with the school promotion policy.
- I also accept the changes made from time to time in the policies of the School by the Management.
- Parents are required to obtain receipts for the Original Transfer Certificate, Marks Sheet, Migration Certificate, as also for Passports from the SNPS Office.
- If and when the students do not report to the School on the due date after vacation or sanctioned leave, parents MUST accompany the students to the School and meet the Principal/CAO.

Issue of Transfer Certificate

- That the parents who wish to withdraw their children at the end of an Academic Year will have to give a notice of at least two months prior to the commencement of the next term, failing which the parent is liable to pay full fees for the next academic year. At any given time, 12 days notice is to be given to the school for withdrawal of a child during an academic year. That the Transfer Certificate is issued only after all the dues are settled.
- Transfer Certificate will be issued only when applied for in writing

Date:

Signature of Parent

UNDERTAKING-2

(To be signed and returned with the Application form by the Parent)

Swimming/Rock Climbing/Trekking/Mountaineering/Boxing/Gymnastics/Microlite Flying/Para Sailing/River Rafting and other planned adventure activities.

I shall be happy if my wardRoll No..... is included in the above mentioned courses/activities as and when conducted by the School and if my ward expresses his/her desire to join them. This may be treated as my formal consent for the above courses.

I agree to abide by the directions of the Course-in-Charge and other authorities at Shanti Niketan Public School, Agra - 282001 at all times during the course of training of my ward.

In case of any mishap, accident or injury to my ward, I will not hold the Shanti Niketan Public School, Agra - 282001 or any member of its staff wholly or partially responsible for it.

I also agree that any disciplinary action taken against my child by the School management will be binding on me.

Date:

Signature of Parent

UNDERTAKING-3

(To be signed and returned with the Application form by the Parent)

I have read the rules of Shanti Niketan Public School and agree to abide by them. In spite of normal precautions taken by the School, if any mishap or accident or injury takes place during the period of my ward's stay at the School or if and when he/she joins tours, excursions or camps, I will not hold the institution or any of its staff wholly or partially responsible for it.

Date:

Signature of Parent

UNDERTAKING-4

(To be signed and returned with the Application form by the Parent)

I herewith authorise the School authorities to decide the appropriate medical attention, including hospital admission / surgery in case of emergency if the School can not contact me or any other member of the family or local guardian and I am bound to pay the expenditure towards the hospitalisation / treatment if the same exceeds Rs. 1000/- (Rupees one thousand) per incidence.

Any Medical condition which disturbs the school environment and was not disclosed at the time of admission will entail in the removal of the child without refund of fees.

(In case of Epilepsy): The School will not be held responsible for any incidence that may be caused for my not reporting any case of epilepsy of my ward in the past.

Date:

Signature of Parent

LIBRARY APPLICATION FORM

Library Reg. No. :

Name : _____

Father's Name : _____

Date of Birth : _____

Class : _____ Sem./Year : _____

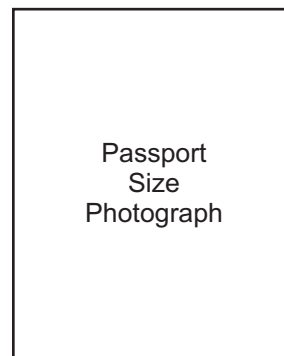
Session : _____ Enrolment / Admission No. : _____

Amount of Security : _____

Admn. No. / Class No. : _____

1. Permanent Address : _____

2. Correspondence Address : _____



Signature of Student

Librarian

Director

Campus : NH-3, Agra-Gwalior Road, Tehra, Agra-282001
Corporate Office : 2/363, Mall Road, Pratappura Crossing, Agra-282001
Fax No. : 0562-2251372
e-mail : sadaa_vijay@yahoo.com, snpsresidential@gmail.com
Contact No. : 9358506796, 9358296575, 9760344994

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