



GWALIOR GLORY PRIDE

**Near CGST Building, Sirol Road, City Center,
Gwalior - 474001 Ph. No. - 7489600153**

M. P. Government Affiliation No. 121699

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REGISTRATION CUM ADMISSION FORM

Session : 20 - 20

Name of the Student : _____

Class : _____

GENERAL INSTRUCTIONS

1. All the information in the form should be filled in CAPITAL LETTERS ONLY.
2. Student Name : Please write full name.
3. Mother's Name / Father's Name : Please write full name. This information will reflect in student's Marksheet.
(Short forms not permitted.)
4. Student's Date of Birth should be the same as mentioned in the Birth Certificate.

GWALIOR GLORY PRIDE

(Registration / Admission) Session : 20__ - 20__

FOR SCHOOL OFFICE USE ONLY

REGISTRATION No. _____ Date _____

ADMISSION No. _____ Date _____

NAME & SIGNATURE OF ADMISSION INCHARGE _____

Affix recent
Passport size
photograph
of student

- Please read all the instructions carefully before filling up the form.
- Please write all the information in Capital letters only.
- Admission will be on merit basis only. Submission of form does not guarantee admission.

STUDENT INFORMATION

Class in which Admission is sought _____

First Name _____ Middle Name _____ Last Name _____

Gender : Male Female Age as on - 01st April of Session : Years _____ Months _____ Days _____

Mention if Student is the Only Child _____ Yes/No whether Girl/Boy _____

Date of Birth : Date _____ Month _____ Year _____ Birth Place _____

Date of Birth (in words) _____

(Should be the same as mentioned/given in Birth Certificate)

Nationality _____ Religion _____ Mother Tongue _____

Category SC / ST / OBC / GEN (Certificate to be attached in case of SC / ST / OBC) _____

(In absence of the certificate, will be treated as "General" category)

Caste _____ Blood Group _____

Allergies, if any to medicine and food

Birth History / History of major illness or disorder, if any :

Interests (Hobbies of Student) 1. 2. 3.

SSSMID of Student Aadhar Card No.

If not a domicile of Madhya Pradesh, please fill a form available at office for the same.

Bank Name Branch Name

Bank A/c No. IFSC Code

Stable / Permanent Mobile No. for School Communication Purpose :

RESIDENTIAL ADDRESS

WARD NUMBER

PINCODE

Phone Nos. (Res.)

(Office)

EMERGENCY CONTACT NUMBERS

SCHOOL PARTICULARS

Previous class passed _____ Previous school attended _____

Previous school was Affiliated to - C.B.S.E. / M.P. Board / I.C.S.E. / Others _____

Marks (In Percentage) / Grade (overall) _____

Aggregate Marks _____

Total number of real Brothers _____ Sisters _____

Whether any real brother / sister studying in this school - Yes / No :

(If Yes) Name of the brother / sister _____ Class _____ Sec. _____

Admission No. _____

PARENT'S INFORMATION

Academic Session 20 ____ - 20 ____

Father* Full Name : Mr. _____ Age : _____		Affix recent Passport size photograph of Father
Educational Qualification :		
Occupation : Business <input type="checkbox"/> Service <input type="checkbox"/> Profession <input type="checkbox"/> Other <input type="checkbox"/>	Organisation :	
Income (Per Annum) :	Designation :	
E-mail id : _____ Aadhaar Card No. _____		
Office Address & Phone No. : _____		
SSSMID No. _____		
Mobile No. : _____		

Mother* Full Name : Mrs. _____ Age : _____		Affix recent Passport size photograph of Mother
Educational Qualification :		
Occupation : Business <input type="checkbox"/> Service <input type="checkbox"/> Profession <input type="checkbox"/> Home Maker <input type="checkbox"/>	Organisation :	
Income (Per Annum) :	Designation :	
Office Address & Phone No. : _____		E-mail ID : _____
Mobile No. : _____		SSSMID No. _____
Total Number of Children : _____		Aadhaar Card No. _____

*Guardian in the absence of Parents.

**Full name of both parents should be filled in. Please do not use nicknames used at home.

DECLARATION

1. I hereby certify that the date of birth and spellings of name of my child / ward given in Admission Form is correct to the best of my knowledge and I shall not make any request for change.
2. I fully understand and agree that registration is not binding for admission. It may be given only when suitable vacancy exists.
3. I understand that rendering false or misleading information or withholding correct information at any point of time may disqualify the child of admission / education at this school.
4. Certify that I am the bonafide guardian/parent of the child.
5. I shall duly inform school in writing about change in residential or office address or any other details such as Mobile/Phone number etc related to the child.
6. Having read carefully and explained to me the rules, regulations and procedures laid down on the school notice board and being desirous of having my child / ward get education in this school, I hereby agree to abide by them. I understand that the decision of the management of the school shall be final and binding on me. All the disputes are subject to jurisdiction of Gwalior only.

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(With Black Pen)

Signature of the Father/ Guardian

Place : Gwalior

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Signature of the Mother

Date : _____

GWALIOR GLORY PRIDE

PROCEDURES, TERMS AND CONDITIONS

Registration Procedures and Rules

- 1.1 Registration Forms are to be filled in and submitted to the School office before the end of the Registration Period.
- 1.2 Incomplete or illegible Registration Forms, without photographs will not be processed /accepted.
- 1.3 Mere issue of form and registration does not imply admission, which is subject to the availability of seats and other procedures.
- 1.4 Photocopy of report card of the last 2 years examination passed and Transfer Certificate must be attached with the Registration Form for Class 1 and above.
- 1.5 Age should be properly specified on the forms.

Admission Procedure

- 2.1 Candidates whose names are included in the admission list must pay the fees by the dates indicated on the list, otherwise admission may stand cancelled, as the seats are limited.
- 2.2 Parents are requested to carefully fill and submit the Registration Form, Class Slip & Transportation Form, Parent-Teacher association form after confirmation of admission.
- 2.3 The date of birth of the child is required to be supported by a copy of Birth Certificate duly issued by the Municipal Corporation, duly attested. An affidavit or any other evidence is not acceptable in place of Birth Certificate. It is to be attached with the Admission Form. For class I and above, Transfer Certificate is to be attached.
- 2.4 Your ward/Child has to report at the school in complete School Uniform, along with books and stationary as prescribed by the school, from the very first day.

Bus Rules

- 3.1 Request for using the school bus must be made at the beginning of the session i.e. April. No request will be entertained during mid-session.
- 3.2 It will be the sole responsibility of the parents to escort the pupil to and from the fixed bus stops. The bus stop will be fixed by the school management. **The bus facility is extended at the sole risk and responsibility of the parents.**
- 3.3 Any suggestions or complaints should be reported to the conveyance-in-charge. Parents are expected to treat the bus staff courteously. Do not give instructions to bus staff, driver or conductor. Complaints should be made in writing at the school office.
- 3.4 Parents must ensure that the student reaches 5 minutes prior to the time given for pick-up at bus stop.
- 3.5 Any change of pick-up or drop or route number should be intimated with an application at the school office.
- 3.6 Any change of the bus or its staff shall be at the sole discretion of the school management.

Procedure for Fee Payment

- 4.1 Fee other than the admission fee is charged monthly for every student.
- 4.2 (A) Fee at the time of admission is payable by Cash/Demand Draft / Pay Order.
(B) Fee, thereafter, is payable by A/c payee cheque or Cash/NEFT/Online/RTGS at any branch of HDFC Bank or ICICI bank in Gwalior during banking hours or any other mode of collecting fees as decided by the school management & informed to parents.
(C) The name of the child, class, section should be written at the back of the cheque clearly.
(D) Late fee @ 1 % per month will be charged after the due date i.e, end of every month.
(E) Cheque dishonour/return charges payable to the bank Rs. 590/- or applicable rate.
- 4.3 The mode of payment of fees will be at the sole discretion of the school management.

Right of Alteration / Modification

- 5.1 Management reserves the right to modify, alter and / or include any other terms and conditions that may be deemed fit in the interest of the Institution.

Medical Facility

- 6.1 The school provides facility of First-Aid only.
- 6.2 The school cannot be held responsible for injury suffered by a child during school hours. No reimbursement of charges would be made towards any medical treatment.

Withdrawal Rules

- 7.1 Application for withdrawal is to be made to the school office. No child can be withdrawn till a written request from parents is put up. A one month notice period or one month notice fee is required for withdrawal.
- 7.2 Clearance must be obtained from the laboratory and library in-charge before applying for withdrawal.
- 7.3 Transfer Certificate will be issued after one week of the application and clearance of all dues.

Disclaimer : All the above terms & conditions are subject to amendment from time to time as per the decision of the Management. The decision of the management shall be final in all matters pertaining to the admission proceedings and policy matters of the school. For all purposes, area of Gwalior (M.P.) only.

Signature of Parents

Date _____

(Father's full Name _____)

Gwalior

(Mother's full Name _____)

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DECLARATION

1. I _____ Father/Guardian of _____ do solemnly declare and certify that the particular given and documents submitted by me of my child/ward are correct. If found incorrect, the school may reject admission of the child. I have fully *understood* the rules and regulations of the school, and it shall be my responsibility to see that my son/daughter/ward shall unquestionably abide by the decision of the Principal/Management and render all co-operation to the school.
2. I hereby certify that the date of birth and spellings of name of my child / ward given in Admission Form are correct to the best of my knowledge and I shall not make any request for change.
3. I fully understand that registration is not binding for admission. It may be given only when suitable vacancy exists.
4. I understand that rendering false or misleading information or withholding correct information at any point of time may disqualify the child of admission / education at this school.
5. I hereby certify that I am the bonafide guardian/parent of the child.
6. I shall duly inform school in writing about change in residential or office address or any other details such as Mobile/Phone number etc related to the child.
7. Having read carefully and explained to me the rules, regulations and procedures laid down on the school notice board and being desirous of having my child / ward educated in this school, I hereby agree to abide by them in all respects. I understand that the decision of the management of the school shall be final and binding on me.
8. I hereby agree that there can be an increment in fee structure in the next academic years.
9. I have made careful note of various details regarding the payment of school fees. I have made satisfactory arrangements of remittance of school fees within due dates without waiting for a reminder from the school. I will pay the school fees through cash / crossed cheques / NEFT/online as per rules. Withdrawal of students after remittance of full fee in school account would be at the sole responsibility of the parent / guardian.
10. I shall submit original T.C. & self certified photocopy of Marksheet, Birth certificate, Parents photo ID proof, Address proof, Aadhaar Card & SSSMID, Bank Account details at the time of admission.
11. I hereby certify that in case I do not claim the Caution Money paid by me for a period of three years after my child/ward left the school, any rights over refund of this amount will stand relinquished by me.
12. I hereby agree that my child/ward and myself shall follow all the rules, regulations and procedures given in the school diary, circular or through any other mode laid down by school from time to time.
13. All details / information in admission form have been verbally explained to me in Hindi also.
14. I hereby put my signature to confirm the above declarations.
15. I agree that till I submit all the mentioned documents for admission of my child, admission process will not be complete.

Signature of the Father/ Guardian _____

Place : Gwalior

Signature of Mother _____

Date : _____

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UNDERTAKING FORM

We acknowledge that participating in activities involves certain risks during school time (some of which we may not be fully aware of) and that injuries or other harm could occur inadvertently to my child or others.

We agree to indemnify and hold the School harmless from all losses, liabilities, damages, costs or expenses which arise during or result from my child participation in the activities.

Date : _____

Signature of the Father

Signature of the Mother

Place : _____

Father's Name _____

Mother's Name _____

SMS, MAIL & NOTIFICATION THROUGH SCHOOL, SOFTWARE AUTHORISATION

Student Id : _____

(To be filled by the School Admission Office)

Student Name _____

We authorize the school to send SMS, e-mail and Login Ids on school software on our Mobile numbers given below for the alerts and other related information :

Mother's Mobile No. :	_____	Father's Mobile No.:	_____
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Mother's e-mail id :	_____	Father's e-mail id :	_____
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Mother's Name :	_____	Father's Name :	_____
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Mother's Signature :	_____	Father's Signature :	_____
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Date : _____

GWALIOR GLORY PRIDE

TRANSPORTATION FORM

We request that my Son / Daughter _____ of
Class _____ Section _____ may be permitted to use the bus arranged / provided by the school for his / her
journey between _____ and G.G.S., Gwalior w.e.f. _____.

Phone Number

Residential Address

Mobile No. (Father / Mother) _____ Landline No. _____	
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Teacher's Child : Yes/No

If Yes, Name of Teacher

OR

We do not wish to use transport arranged/ provided by the school for our child.
I will furnish, details of the personal transport being used for my child and get an Identity card issued by the school.

DECLARATION

1. We undertake to pay the bus charges to the agency appointed by the school for transportation of students as per the rules in force from time to time and also undertake to pay yearly hikes in the conveyance charges or increase in fuel prices or taxes. I hereby agree that there can be an increment upto 10% in conveyance charges during every academic year. The mode of payment of conveyance charges will be at the sole discretion of the school management.
2. We understand that it would be our responsibility to drop and pick-up our child at / from the specified bus stop. Bus Time, Bus Route, Change of Bus, Route No., Bus No. and stoppage will be solely decided by the school only and it will be binding on us.
3. We have no objection for appointment of agency by the school for transportation of students.
4. We accept that the bus facility is extended to our child/ward at our own risk and responsibility.
5. We have been informed, explained about terms and conditions regarding transport facility provided by the School and we do hereby agree and give consent to the same.

Date : _____

Signature of Father / Guardian :

Full Name : _____

Signature of Mother :

Full Name : _____

FOR SCHOOL USE ONLY

Transport (w.e.f) _____ Bus number _____ Route _____

Approval Signatures :

Concerned Class Teacher _____

Academic Co-ordinator _____

Signature of Transport In-Charge

GWALIOR GLORY PRIDE

PARENT - TEACHER ASSOCIATION FORM

Dear Parents

Kindly fill in the form given below.

Affix recent
passport size
photograph
of student

STUDENT INFORMATION

First Name Last Name

Gender : Male Female Date of Birth : D M Y

Date of Birth (in words)

FAMILY INFORMATION

Father / Guardian

Name : Age : Nationality :

Educational Qualification :

Organisation working for : Designation :

Office Address :

Annual Income : Landline/Moblile No. :

Area of working : Medical / Media / I.T. / Engineering / Civil Services / Academic / Banking / Other

Area of interest : Cultural / Sports / Art & Craft / Music / Other /

How can I contribute to School :

Mother / Guardian

Name : Age : Nationality :

Educational Qualification :

Organisation working for : Designation :

Office Address :

Annual Income : Landline/Moblile No. :

Area of working : Medical / Media / I.T. / Engineering / Civil Services / Academic / Banking / Other

Area of interest : Cultural / Sports / Art & Craft / Music / Other

How can I contribute to School :

.....

Signature of Father / Guardian

Date

.....

Signature of Mother / Guardian

Date

GWALIOR GLORY PRIDE

Academic Session 20____ - 20____

CLASS SLIP

Affix recent
passport size
photograph
of student

Name of the Student _____
(First name) (Middle name) (Surname)

Date of Birth _____

Gender - Male Female Category - SC / ST / OBC / GEN _____

Please mention if student is the only child _____ Yes/No. Whether Girl/Boy

Real Brother / Sister studying in this school- Name _____ Class _____ Sec. _____

Father's Name _____ Mother's Name _____

Residential Address _____

Tel. No. (Off.) _____ (Res.) _____ Mobile No. _____

* In case of any changes in the information given above, immediately inform in writing to the school office.

** This slip should be submitted at School office for allotment of section.

FOR SCHOOL OFFICE USE ONLY

TO THE CLASS TEACHER

Name of the Student _____

Class _____ Section _____

Transport (Bus / Own) _____

Admission No. _____ Date of Admission _____

Signature

Office Incharge

FOR SCHOOL OFFICE

Received class slip of Mst./ Ms. _____ Class _____ Section _____

Dated : _____

Signature of Class Teacher : _____

GWALIOR GLORY PRIDE

MEDICAL HISTORY OF THE CHILD

Name of the student _____ M/F _____ Class _____

Date of Birth _____ Blood Group _____

Father's Name _____ Mother's Name _____

VACCINATIONS

Immunization	Age Recommended	Due Date	Date
BCG	0-1 Month		
Hepatitis B + I . PV + PCV	1 Month		
	2 Months		
	3 Months		
DPT	1.5 Months		
D / TAP	3 Months		
	4 Months		
HIB	1.5 Months		
	3 Months		
	4 Months		
Oral Polio Polio Vaccine	At Birth		
	2 Months		
	3 Months		
	4 Months		
Oral Rota Virus	2 Months		
	3 Months		
	4 Months		
Typhoid	6 - 9 Months		
MMR 1	9 Months		
MMR 2	15 Months		
Hepatitis A	12 - 19 Months		
Chicken Pox	15 Months		
<u>BOOSTER DOSES</u>			
D Tap Booster + PCV BOOSTER	16 - 18 Months		
D Tap Booster + IPV	6 Years		
HIB Booster + IPV	18 Months		
Oral Polio Vaccine Booster	5 Years		
Typhoid Booster	24 Months		

Certified that Master/Miss _____ Son/Daughter of _____

* is medically fit.

* has no allergy.

* has not suffered from any Acute / Chronic disease which need constant medical Supervision (if yes please specify)

Date : _____

Name with Regn. No. & Seal

Signature of Medical Officer

GWALIOR GLORY PRIDE

Academic Session 20____ - 20____

LIST OF DOCUMENTS TO BE SUBMITTED ALONG WITH ADMISSION FORM

Documents Check List

- | | | |
|---|------------------------------|-----------------------------|
| 1. Admission form duly completed | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Self Certified photocopy of Birth Certificate | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Original Transfer Certificate | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Self Certified photocopy of original mark sheet of last examination passed | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Self Certified photocopy of Address Proof | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Self Certified photocopy of Parent's I D Proof | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Self Certified photocopy of Student's Aadhaar Card | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. Self Certified photocopy of Parent's Aadhaar Card | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9. Self Certified photocopy of Family SSSMID | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10. Self Certified photocopy of Caste Certificate (in case of SC/ST/OBC) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11. Self Certified photocopy of Disability Certificate (in case child is disable) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 12. Self Certified photocopy of Student's Bank Passbook | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Admitted to class _____ Sec. _____

Principal's Signature

Fee Receipt No. _____ Date _____

Form checked by : _____ Date : _____

Accountant's Signature