## **Application for Admission**

(To be filled in Block Letters)

Registration No:	Admission No:	



1. Name					
Gender     M F      Place of Birth (Town / State / Co	3. Date of Birth ( DD/ buntry)	/MM/YYYY)	4. Blood Group		Pupil's photo
6. Nationality	7.	. Mother Tounge			
8. Caste	9.	. Religion			
TCIS does not have any sort of bias. These details ar  10. Address		1. Residence Pho	one No.	12. Emergen	icy Phone No.
City: State: Pin Code: Country:	13	3. e-mail Address		14. School 1 ☐ Yes	ransportation
15. Class to which admission is so	ught		16. Last School & Class Atte	ended	
17. Second Language			18. Third Language		
19. a. Name of the Sibling Studying  1.  2.	g in TCIS		b. Grade & Admission No.		
Parent's / Guardian's Information 20. a. Father's/ Guardian's Name	n		21. a. Mother's Name		
b. Educational Qualification			b. Educational Qualification	າ	
c. Occupation			c. Occupation		
d. Organisation			d. Organisation		
e. Designation			e. Designation		
f. Phone No.			f. Phone No.		
g. Annual Income			g. Annual Income		

01 Application Form

Please tick the ones your child is interested in and mention if he or she has participated in any of these activities. Enclose copies of the certificate if any

Essay Writing						
	Writing Poetry	Writing Articles in Magazi	nes Debate	Public speaking	Quiz Elocution	
23. Extra Curricular Inte	rests					
a. Sports						
Cricket Lav	wn Tennis Ba	sketball Table Tennis	s Volleyball	Football Badmir	nton Athletics	
b. <b>Cultural</b>						
Singing Ind	lian Classical	Western Light Musi	c <b>Dance</b>	Indian Classical	Contemporary	
Instrumental Music	Guitar	Keyboard Violin	Drums Flute			
24. Parents / Guardians	Consent Form					
a. I would like my Son/Da	aughter/Ward to ta	ake part in the following activ	vities .			
b. Parent volunteering ac	ctivities we would	like to involve in:				
Field Trip	(	Conduct story telling sessions	5	Craft sessions		
Others						
I hereby declare that the	details furnished a	above are true and correct to	the best of my know	wledge and belief.		
Signature of the Parent /	Guardian		Signature of th	ne Principal		
orginature or the rate in the	Caararar		Signature of the	ic i i i i i i i i i i i i i i i i i i		
Date:	Place:					
	i idee.					
For Office Use On	ly Accepted	□ Yes □ No				
For Office Use On	ly Accepted	□ Yes □ No				
For Office Use On  Entrance Test Report	ly Accepted	□ Yes □ No	Admitted To			
	ly Accepted	□ Yes □ No	Admitted To			
		□ Yes □ No	Admitted To			
Entrance Test Report			Admitted To  3 Photographs	Immunization chart	Medical Report	
Entrance Test Report Certificate and Documer	nts			Immunization chart	Medical Report	
Entrance Test Report  Certificate and Documer  Birth Certificate	nts			Immunization chart	Medical Report	
Entrance Test Report  Certificate and Documer  Birth Certificate  Transportation Details	nts		3 Photographs		Medical Report	
Entrance Test Report  Certificate and Documer  Birth Certificate  Transportation Details  Address	nts	ate AddressProof	3 Photographs			
Entrance Test Report  Certificate and Documer  Birth Certificate  Transportation Details  Address	nts	ate AddressProof	3 Photographs			