



# The Shri Ram Early Years

play, grow & learn together

Sector 48, Vipul Greens,  
Gurgaon – Sohna Road, Gurgaon-122001  
Phone: + 91 9953613785

## APPLICATION FORM

Please  
paste child's  
recent photo  
here

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

Receipt Book Serial No.: \_\_\_\_\_

Parents are requested to note that:

- This is not an Admission Form, nor does the submission of this Form entitle any child to automatic admission to the School.
- Rs.500 will be charged at the time of submission of the admission form.

1. Name of the Child: \_\_\_\_\_ Sex: M/F \_\_\_\_\_

2. Nationality: \_\_\_\_\_

3. Date of Birth: \_\_\_\_\_

4. Mother

Father

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Education: \_\_\_\_\_

Education: \_\_\_\_\_

Mobile No. : \_\_\_\_\_

Mobile No. : \_\_\_\_\_

Please specify the following:

Please specify the following:

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Designation: \_\_\_\_\_

Designation: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Office Address: \_\_\_\_\_

Office Address: \_\_\_\_\_

(If applicable) \_\_\_\_\_

(if applicable) \_\_\_\_\_

5. Residential Address: \_\_\_\_\_

6. Residential Phone No. (s): \_\_\_\_\_

7. a. Emergency No. (s): \_\_\_\_\_

b. E-mail: \_\_\_\_\_

8. Marital Status:  Married  Divorced  Separated  Widowed

9. Details of sisters and brothers in chronological order including the applicant. (oldest to youngest)

	Name	Age	M/F	School	Class/Sec.
a.	_____	_____	_____	_____	_____
b.	_____	_____	_____	_____	_____
c.	_____	_____	_____	_____	_____



This is to certify that the facts given by me on the application form are true. I understand that if any part of it is found to be false, this application will be cancelled. I also accept that filling the application form does not ensure a meeting with the Principal and Staff.

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

\_\_\_\_\_  
Signature of Mother / Father / Guardian

Please note the following:

1. This form must be accompanied by:
  - a) One copy of identification proof
  - b) One photocopy of the original Municipal Birth Certificate.
  - c) Five recent passport size photographs of the child.
  - d) Two recent passport size photographs of each parent.
  - e) Proof of Residence - A Photocopy of the Electoral Card / Passport / Driving License / Telephone Bill / Lease Agreement.
  - f) A copy of the Immunization Card
2. Please do not attach any other annexures and carry all the original documents for verification.

**We would appreciate if you answer these questions in your own words.**

1. Children at this age are always doing things that make us happy. Please state one such memorable incident that truly touched your heart.

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2. Appreciating children for what they do builds their positive image. What do you say / do to show your appreciation to him / her?

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3. Children love to be kept busy, what are the three things that you and your child enjoy most doing together?

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4. Children are still learning right from wrong. If you see that your child is making a mistake, how do help your child to do the right thing?

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