



27, Opp. Sardarnagar Police Chowky, Talawadi Circle, Airport Road, Ahmedaad - 382475
Phone : 96383 69481 Webside : www.littleworld.in

ADMISSION FORM

Admission Form No. : _____
Academic Year : _____
Child's Name : _____
Place & Date of Birth : _____
Mother Tongue : _____
Gender : Male : Female :
Religion : Caste : _____ SC/ST/BC : _____ Nationality : _____
Father's Name : _____
Educational Qualification : _____ Contact No. : _____
Occupation : _____
Office Address : _____

Mother's Name : _____
Educational Qualification : _____ Contact No. : _____
Occupation : _____
Office Address : _____

Residence Address : _____

Emergency Contact Name : _____
Relationship with Student : _____ Contact No. : _____
Any Medical History / Allergies the school should be aware of : _____

* We hereby apply for admission of our child in **LITTLE WORLD PRIMARY SCHOOL**. (Kindly submit a photo and photocopy of your Child's Birth Certificate.) * Fees once paid is non-refundable.

DECLARATION

The School and it's affiliates shall not be responsible for any injuries, accidents, damages, claims, demands etc. whatsoever holding each individual student/parent personally responsible, during all time in the school premise and while movement to and fro from the school to residence, waiving all probative rights. We cannot be held responsible for any injuries, damages etc.

Father's Signature : _____ Date : _____
Mother's Signature : _____ Principal's Signature : _____