

# REGISTRATION FORM

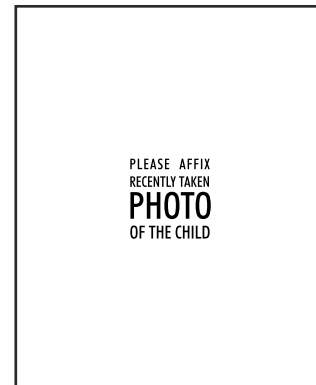


GREENWOODS GLOBAL SCHOOL  
Evolve to excel as a global citizen  
HALDWANI, NAINITAL (U.K.)

Village: Dhanpuri, 6 Khata Bhabar, Tehsil: Haldwani, Nainital- 263139,  
E-mail: principal@greenwoodsglobalschool.com  
website: www.greenwoodschool.com, Pn no. : 8958968742

REGISTRATION FORM NO:

APPLIED FOR CLASS:



## PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE FILLING UP THE FORM:

- A. Please fill up the form in CAPITAL LETTERS only.
- B. Filling up this form does not guarantee admission.
- C. Incomplete / Illegible forms are liable to be rejected.
- D. Strike out whichever is NOT applicable.
- E. Where details cannot be entered, please write N.A.
- F. In case of others, please specify fully.

## BASIC INFORMATION

NAME OF THE STUDENT :     
LAST NAME MIDDLE NAME FIRST NAME

SEX M/F : \_\_\_\_\_

DATE OF BIRTH:  DD  MM  YYYY \_\_\_\_\_

LAST CLASS ATTENDED: \_\_\_\_\_ STATUS : \_\_\_\_\_ OVERALL GRADE: \_\_\_\_\_

LAST ATTENDED SCHOOL NAME / ADDRESS: \_\_\_\_\_

NATIONALITY: \_\_\_\_\_

BLOOD GROUP : \_\_\_\_\_

HOBBIES & INTERESTS: \_\_\_\_\_

NATIVE ADDRESS: \_\_\_\_\_

POSTAL ADDRESS: \_\_\_\_\_

### CHILD DIFFICULTIES

HAS YOUR CHILD EVER BEEN IN A SPEECH THERAPY PROGRAM?

Yes  No

HAS YOUR CHILD EVER BEEN IDENTIFIED AS HAVING A LEARNING DISABILITY?

Yes  No

HAS YOUR CHILD EVER EXPERIENCED SOCIAL, EMOTIONAL OR BEHAVIOURAL DIFFICULTIES?

Yes  No

DOES YOUR CHILD HAVE A PHYSICAL DISABILITY?

Yes  No

IF YES, PLEASE DESCRIBE AND ATTACH ANY RELEVANT INFORMATION OR TEST REPORTS. \_\_\_\_\_

### LANGUAGE ABILITIES

HOME LANGUAGE DETAILS 1ST LANGUAGE: \_\_\_\_\_ 2ND LANGUAGE: \_\_\_\_\_

LANGUAGE SPOKEN AT HOME: \_\_\_\_\_ CHILD READS INDEPENDENTLY IN: \_\_\_\_\_

PARENT'S LEVEL OF ENGLISH (PLS TICK MARK WHEREVER APPLICABLE): SPEAKING  READING  WRITING

# FAMILY INFORMATION

DETAILS	MOTHER'S			FATHER'S		
NAME	SURNAME	MIDDLE	FIRST	SURNAME	MIDDLE	FIRST
	YYYY/MM/DD			YYYY/MM/DD		
DATE OF BIRTH						
MOTHER TONGUE						
QUALIFICATION (TICK)	SSC / UNDERGRADUATE / GRADUATE / POST GRADUATE / PROFESSIONAL / OTHER			SSC / UNDERGRADUATE / GRADUATE / POST GRADUATE / PROFESSIONAL / OTHER		
IF OTHERS SPECIFY						
PROFESSIONAL (TICK)	SELF-EMPLOYED / BUSINESS / TRADING / SERVICES / RETIRED / OTHER			SELF-EMPLOYED / BUSINESS / TRADING / SERVICES / RETIRED / OTHER		
IF OTHERS SPECIFY						
NAME OF COMPANY						
DESIGNATION						
OFFICE ADDRESS						
	CITY:	PIN		CITY:	PIN	
CONTACT NO	TEL. No.(O/H)	Mobile No.:		TEL. No.(O/H)	Mobile No.:	
EMAIL ADDRESS						
EMERGENCY CONTACT NO's	CONTACT PERSON			CONTACT PERSON		
GROSS INCOME						

CHILD LIVES WITH :                      PARENTS     FATHER     MOTHER     ANY OTHER(GUARDIAN)  \_\_\_\_\_

OTHER'S / GUARDIAN'S NAME : \_\_\_\_\_ RELATION WITH STUDENT: \_\_\_\_\_

INFORMATION OF BROTHERS / SISTERS : (NOT COUSINS)

Sr. No.	M/F	NAME	Sr. No.	Sr. No.	NAME OF SCHOOL

## DECLARATION

I/we allow my child/ward to attend all the tours, excursion or camps organized by the school. In spite of school's precautions if any mishaps, accident or injury takes place during these activities or during the period of my ward's stay in the school. I will not hold the institution or any member of the staff responsible for it.

I/we solemnly confirm that the information given above is true and fair to my/our knowledge and belief and no material information has been withheld. I/We agree to abide by the Rules and Regulations framed by the School from time to time.

Date:  DD  MM  YYYY

Father    Mother    Legal Guardian (if applicable)

### DOCUMENTS TO BE ATTACHED

1. Leaving Certificate / Birth Certificate    2. Academic record of the last school attended.    3. A copy of ration card.

## FOR OFFICE USE ONLY

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

Called for Counseling on : \_\_\_\_\_

Admission granted on : \_\_\_\_\_

Remark : \_\_\_\_\_

File/Reg. No. : \_\_\_\_\_

PRINCIPAL

DIRECTOR