



# THE CAMBRIDGE SCHOOL

RAYAGADA

## APPLICATION FORM

Application No.: CPS\_\_\_\_\_ /19

Affix 4x8  
Photograph of the student with his favourite Toy

### Schooling Levels :

Pre School

Jr. Kg.

Sr. Kg.

Class - I

Class - II

Class - II

Class - IV

Class - V

Class - VI

Class - VII

Class - VIII

### Student Information

Name \_\_\_\_\_

Gender : Male  Female  Aadhaar Card No. \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Place of Birth \_\_\_\_\_  
DD MM YYYY

Nationality \_\_\_\_\_ Religion \_\_\_\_\_

Caste \_\_\_\_\_ Mother Tongue \_\_\_\_\_

Contact Address \_\_\_\_\_

Passport No. \_\_\_\_\_ Place of Issue \_\_\_\_\_ Validity \_\_\_\_\_  
(If Available)

Hobbies \_\_\_\_\_  
\_\_\_\_\_

Other Interests \_\_\_\_\_  
\_\_\_\_\_

Name & Address of the pre school in which the student is currently enrolled (If applicable)  
\_\_\_\_\_  
\_\_\_\_\_

Pre School

Class - I

Class - V

Jr. Kg.

Class - II

Class - VI

Sr. Kg.

Class - III

Class - VII

Class - IV

Class - VIII

### Family Information

Mother's Name \_\_\_\_\_

Aadhaar Card No. \_\_\_\_\_

Qualification \_\_\_\_\_ Profession \_\_\_\_\_

Organization & Designation \_\_\_\_\_

Business (If Applicable) \_\_\_\_\_

Phone Number \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_ Annual Income \_\_\_\_\_

Father's / Guardian's Name \_\_\_\_\_

Aadhaar Card No. \_\_\_\_\_

Qualification \_\_\_\_\_ Profession \_\_\_\_\_

Business (If Applicable) \_\_\_\_\_

Phone Number \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_ Annual Income \_\_\_\_\_

Student is living with Both Parents  Mother  Father  Guardian

### Details of Siblings

1. Name \_\_\_\_\_ Age \_\_\_\_\_

Institution studying in \_\_\_\_\_ Grade/Class \_\_\_\_\_

2. Name \_\_\_\_\_ Age \_\_\_\_\_

Institution studying in \_\_\_\_\_ Grade / Class \_\_\_\_\_

## Enclosures

(Without which this application will not be accepted)

A Copy of the following documents (attested photocopies) must be submitted along with the filled application

- a) Birth Certificate
- b) Caste Certificate
- c) A copy of the latest progress report certified by the school in which the student last studied (if Applicable)
- d) 4 individual passport size colour photographs of the student and parents to be enclosed
- e) Transfer Certificate / Migration Certificate (if Applicable)
- f) Wellness Record duly signed by the physician

**Note :** Staple all documents to the top left-hand corner of the application

Would the student avail transport facility provided by the school      Yes                      No

## Declaration

I hereby declare that the information furnished in this form is true to the best of my / our knowledge and belief.

Date :

Place :

Affix  
recent  
passport  
size colour  
photograph  
of Mother

Affix  
recent  
passport  
size colour  
photograph  
of Father

Affix  
recent  
passport  
size colour  
photograph  
of Guardian

Signature of Parent / Guardian

Mother \_\_\_\_\_ Father \_\_\_\_\_

Guardian \_\_\_\_\_

## Four Office Use Only

Admit to :    Pre Fundamentals                      Basic Fundamentals                      Advanced Fundamentals

Roll No. Allotted \_\_\_\_\_ Admission Form No. \_\_\_\_\_

Documents Submitted on Date of Joining :                      Originals                      Photocopy

Birth Certificate                                           

Marks Sheet                                           

Transfer Certificate                                           

Migration Certificate                                           

Caste Certificate                                           

Wellness Record                                           

Seal & Signature

Remarks \_\_\_\_\_

# THE CAMBRIDGE SCHOOL

Raniguda Farm, Hatipathar Road, Rayagada, Odisha -765001

Ph : 06856223231, 06856223902, Mob : 9437181902

Email : thecambridgeschool.rgda@gmail.com

## WELLNESS INFORMATION

Name of the Student \_\_\_\_\_

Class \_\_\_\_\_

Gender : Male  Female  Date of Birth ..... / ..... / .....

Blood Group \_\_\_\_\_ Height \_\_\_\_\_ cms Weight \_\_\_\_\_ kgs

Identification Marks \_\_\_\_\_

Any Allergy / ailment / injuries / physical disability \_\_\_\_\_

Affix recent  
passport size  
colour  
photograph

### Immunization Covered

Poliomyelitis (Polio Vaccine) Yes  No

Diphtheria / Pertussis / Tetanus (Triple Antigen) Yes  No

Measles / Mumps / Rubella (M. M. R) Yes  No

Tuberculosis (B.C.G.) Yes  No

Hepatitis B Yes  No

Hepatitis A Yes  No

Others, kindly specify \_\_\_\_\_

### Does the student have a history of

Congenital Abnormality Yes  No

Rheumatic Heart Disease Yes  No

Bronchial Asthma Yes  No

Epilepsy Yes  No

Diabetes Yes  No

Hypertension Yes  No

tuberculosis Yes  No

Is the child fit & able to participate in sports and expedition ? Yes  No   
If not please enclose a medical certificate

Any remarks specified by the doctor \_\_\_\_\_

Is the child trained with toilet manners ? Yes  No

If not, kindly specify the problem the child faces \_\_\_\_\_

Does the child require any specific diet? Kindly specify \_\_\_\_\_

I, Dr. \_\_\_\_\_, have examined Master / Miss  
\_\_\_\_\_ thoroughly and state that he / she is medically fit to join school.

Registration No.: \_\_\_\_\_

Address and Contact No. \_\_\_\_\_

Date \_\_\_\_\_

Place \_\_\_\_\_

**Signature of Doctor (with seal)**

### **Declaration by Parent / Guardian**

In case of medical emergency which may require surgical procedure, anesthesia, invasive procedures, administration of drugs where a written permission is obligatory, I hereby request the school authorities to authorise on my behalf. Medical treatment may be availed from any competent medical authority or institution.

Date \_\_\_\_\_

(Signature of Parent/ Guardian)

Place \_\_\_\_\_

Name \_\_\_\_\_

Relationship with the pupil \_\_\_\_\_

Address \_\_\_\_\_

Contact No. \_\_\_\_\_

E-mail : \_\_\_\_\_

# **THE CAMBRIDGE SCHOOL**

Raniguda Farm, Hatipathar Road, Rayagada, Odisha - 765001

Ph : 06856223231, 06856223902, Mob : 9437181902

Email : thecambridgeschool.rgda@gmail.com

## GENERAL INSTRUCTIONS

Thank you for your interest in the Cambridge School, Rayagada

Please read the following Rules & Regulations carefully before applying for admission. Filling up the Registration Form :

- i. The registration form is to be filled in BLOCK LETTERS and submitted in person, to the City Office or School Campus (Between 2pm - 5pm) within 3 days from the date of issue of the form. The parent / guardian are requested to bring the Original Money Receipt (issued at the time of purchase of Prospectus) at time of submission of Registration Form.
- ii. It is mandatory for the parents / guardian to fill up the Registration form themselves.
- iii. If the child's age does not meet the criteria for the class he/she is seeking admission to, the management holds the right to cancel the registration. (Refer Age Criteria)
- iv. Registration does not imply admission; it is subject to observation/interaction and availability of seats.
- v. Date of observation / intercom will be intimated during registration.
- vi. The Registration Form should be complete in all respect and the information provided should be true. In case of discrepancy with the facts, the school authority reserves the right to cancel the Registration form as well as the admission of the Child.
- vii. A candidate, who does not qualify for admission, is not eligible to re-apply during the same academic year.