



# KHARAGPUR VISION ACADEMY

(An English Medium Co-Educational Sr. Secondary School)

Affiliation No : 2430236, School Code : 15653

Affiliated to Central Board of Secondary Education, New Delhi

Sadatpur :: PO - Rakhajungle :: PS - Kharagpur Local :: Dist - Paschim Medinipur :: West Bengal - 721301

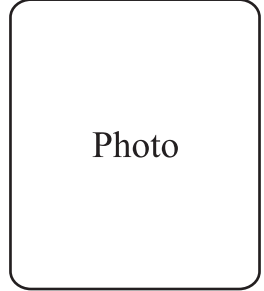
Website : www.kvaschool.edu.in, E-mail : kvaschool2016@gmail.com

Contact No : 9083213786 / 9775101786



Serial No :

## ADMISSION FORM (COMMERCE)



Photo

Candidate Name : .....

Class Applied for : ..... Session : .....

Date of Birth :         Gender : Male  Female  Blood Group :

Age as on : Year:.....Month.....Days.....  
(Current Date)

### Instructions

- Please fill the application form carefully in **CAPITAL LETTERS** using blue / black ink only.
- Mere submission of application form does not ensure admission. It is subject to availability of seats and fulfilling the admission criteria.
- Date of Birth and spelling of candidate's name should be according to the Birth certificate / last school record.
- Registration fee and all other fees / charge once paid at the time of admission are not refundable under any circumstances.
- Please ensure the following documents are submitted : -
  - At the time of Application (Hard Copy Required)**
    - Duly filled application form
    - Three recent passport size photographs of the candidates (One to be affixed and two to be submitted along with the form)
    - A copy of Birth Certificate self attested by the parents /guardian.
    - Copy of progress report / statement of marks / grade of examination last appeared. (Class - II onwards)
  - At the time of admission**
    - Proof of identification of candidate - Passport / Aadhar Card / Other
    - Proof of identification of the parents / guardian - Passport / Voter Card / Aadhar Card
    - A post card size photograph of the child along with parents, in formal dress.
    - Vaccination record of the child.
    - Transfer Certificate from the previous school.
    - Any other relevant document.
    - All the documents in original for verification

### FOR OFFICE USE

Registration Fee Receipt No.

Date of Registration

Interaction / Test Date

Date of Admission

Admission No cum Students Id

Allotment of Section

Signature of Adm. I/C

## CANDIDATE'S DETAILS

NAME OF THE CANDIDATE : .....

DATE OF BIRTH :    PLACE OF BIRTH : .....

NATIONALITY : ..... RELIGION : .....

CATEGORY : SC  ST  OBC  GENERAL  (furnish relevant document in proof of SC/ST/OBC)

PH. IF ANY : ..... AADHAR CARD NO. ....

### ● ACADEMIC DETAILS

NAME OF THE PREVIOUS SCHOOL .....

CLASS ..... BOARD .....

RESULT OF THE LAST ANNUAL EXAMINATION (Pre-Board / Board) - 20.....

| SUBJECT         | MARKS | SUBJECT            | MARKS |            |
|-----------------|-------|--------------------|-------|------------|
| First Language  |       | Life Science       |       | Aggregate  |
| Second Language |       | Physical Science   |       | Division   |
| Science         |       | History            |       | Percentage |
| Social Science  |       | Geography          |       |            |
| Mathematics     |       | Additional Subject |       |            |

1. Attested Copy of the Mark Sheet enclosed. (Yes or No)

2. Transfer Certificate / Character Certificate / Migration Certificate Enclosed. (Yes or No)

### SELECTION OF SUBJECT

(Subject - 2 & 3 - 5 must be chosen as per CBSE Scheme of Studies - 20..... - 20.....)

#### Subject - 1 English Core - 301 (Compulsory)

Subject - 2 : ..... Subject - 3 : .....

Subject - 4 : ..... Subject - 5 : .....

Subject - 6 (Optional) : .....

#### SUBJECT OFFERED

a. Hindi Core - 302 or Bengali - 105

c. Accountancy - 055

e. Mathematics - 041

g. Artificial Intelligence - 843 or Physical Education - 048

b. Economics - 030

d. Business Studies - 054

f. Computer Science (New) - 083 or IT - 802

Signature of the Students .....

Mother Tongue : English  Hindi  Bengali  Other : .....

Second Language Chosen : Hindi  Bengali

Rights of Child : Father  Mother

Hobbies of Child : .....

**● MEDICAL HISTORY OF THE CANDIDATE**

Chronic Ailment (If any) : .....

Has your Child Suffered From Any Major Illness : .....

Allergy From Any Medicine : .....

Any Other Allergy (Please Specify) : .....

**● TRANSPORT FACILITY**

Opting for School Bus Service : Yes  No

Name of Area ..... Closest Landmark : .....

**● FATHER'S DETAILS**

Father's Name : .....

Father's Qualification : M.P.  H.S.  Graduate  Post Graduate  Professional

Specify Details : .....

Father's Occupation : Govt. Employee  Service  Self Employed  Business

Specify Details : .....

Mobile No : ..... E-mail Id: .....

**● MOTHER'S DETAILS**

Mother's Name : .....

Mother's Qualification : M.P.  H.S.  Graduate  Post Graduate  Professional

Specify Details : .....

Mother's Occupation : Govt. Employee  Service  Self Employed  House Wife

Specify Details : .....

Mobile No : ..... E-mail Id: .....

**● RESIDENTIAL ADDRESS**

**Present** : At..... PO..... PS.....

Dist..... State .....Pin No .....

**Permanent** : At..... PO..... PS.....

Dist..... State .....Pin No .....

● **GUARDIAN'S DETAILS**

Guardian's Name : .....

Residential Address : Same as Father's Residential Address      Same as Mother's Residential Address

Mobile No : ..... E-mail Id: .....

Guardian's Relationship with the Candidate : .....

Any specific information about guardianship of the child that the school must know:

Affix recent color  
photograph  
of Father

Size : 4.5 X 3.5 cm

Affix recent color  
photograph  
of Mother

Size : 4.5 X 3.5 cm

Affix recent color  
photograph  
of Guardian

Size : 4.5 X 3.5 cm

Specimen Signature of Father

Specimen Signature of Mother

Specimen Signature of Guardian

**DECLARATION**

I/We hereby declare that the information stated in the registration form is complete and true to the best of my knowledge and belief. I/We understand and agree that misrepresentation or omission of facts will justify the denial of admission, cancellation of admission and / or expulsion. I / We understand there will be no any refund of admission fees paid to the school during Provisional Admission. All the subjects above chosen by me / us with my / our own consent and capacity to deal with all these subjects and under no circumstances will not change the subjects taken for CBSE Board Examination - 20..... - 20.....

If, inspite of the precautions taken by the school, any mishap, accident or injury occurs during the period of our ward's stay in the school, or while traveling from home to the school and back in the school bus, or during educational tours, excursions or campus, I/we will not hold the institution or any member of the staff wholly or partly responsible for the same.

At the time of withdrawal of the child from the school, parents will sign the withdrawal application.

\_\_\_\_\_  
**Signature of Father**

\_\_\_\_\_  
**Signature of Mother**

\_\_\_\_\_  
**Signature of Guardian**

**Principal's Remarks**

Master / Miss ..... has been selected for admission to class ..... for the academic session ..... subject to the fulfillment of terms & conditions as prescribed by the school authorities and as per CBSE Scheme of studies - 20..... - 22.....

Date : .....

Signature of the Principal