



INDO SUNRISE INTERNATIONAL SCHOOL, CBSE

Affiliated to CBSE, Affiliation No:- 830828, New Delhi

ISR Cross, Hoskote-Malur Road, Bengaluru, Karnataka 562114

Phone: 7625036901/902/903

Website: www.isrinternationalschool.com

A QUALITY CERTIFIED INSTITUTION

Class to which
admission sought

Application Form 20_____

Affix Father
Passport Photo

Father

Affix Mother
Passport Photo

Mother

Affix Student
Passport Photo

Student

STUDENT'S DETAILS (as per the Govt Record)

Student's Name:(Fill in block letters) _____

Date of Birth (DD/MM/YY): Gender: Male_____ Female_____

First language:_____ Second Language:_____ Third language:_____

Nationality:_____ Mother Tongue:_____ Blood Group: _____

Religion:_____ Caste:_____ Sub Caste:_____ Category:_____

Caste Certificate No:_____ Date of Issue:_____

Student Aadhar Card Number:

Previous School studied : _____

School address: _____

Student SATS Number : _____ School U-Dise Number:-_____

Child with special need (If any):_____ (yes/no)

If yes specify :- _____

Student Bank Name:-_____ Student Account Number:_____

Student bank details: _____ IFSC Code:_____

FATHER'S INFORMATION (as per the Govt Record)

Father's Name (Fill in block letters):_____

Qualification: _____ Occupation: _____

Mobile Number: _____ E-mail Id:_____

Aadhar card number: _____ Annual Income:_____

MOTHER'S INFORMATION (as per the Govt Record)

Mother's Name (Fill in block letters): _____

Qualification: _____ Occupation: _____

Mobile Number: _____ E-mail Id: _____

Aadhar card number: _____ Annual Income: _____

Guardian Contact Details:

Guardian Contact name: _____

Mobile Number: _____ Relation (with child): _____

Emergency Contact number:- _____

Any Sibling studying in the school: YES NO

If Yes, Name, Class & Section: _____

School name: _____

RESIDENTIAL ADDRESS (Complete address):House No: _____ Street: _____

City: _____ District: _____ Pin Code: _____

Landmark: _____

PERMANENT ADDRESS (Complete address):House No: _____ Street: _____

City: _____ District: _____ Pin Code: _____

Landmark: _____

School admission date:- _____

Whether school transport required:- _____ (yes/no)

DECLARATION:

I, _____ parent of _____ hereby declare that the details provided in this form are correct to my knowledge and I undertake the responsibility of providing any evidence needed to support the information provided here, if necessary for any reason.

Date: _____ Signature of Parent: _____

Approved by Principal with date:- _____

Signature of the Principal:- _____