



SMARTEN SCHOOL

where smartness excels...

REGISTRATION FORM

Name of the child (in capital letters)

Date of Birth (in figure) (in words)

Age as on 1st April of current Academic year Years Months Day

Gender (Please put a tick) Male Female

Nationality of the Child

Name of the school the child is attending

Studying in class Applying for class

Medium of instruction

Parent's Details

FATHER

MOTHER

- Name
- Date of Birth
- Nationality
- Qualification
- Occupation
- Organization
- Office Address

● Residential Address

- Phone (No(s))
- Mobile No(s)
- E-mail

- If an ex student of Smarten Ninos, please mention the year and the branch
- Details of any brother or sister (not cousins) studying in any smarten branch

Name of the child	Name of the Branch	Group

Medical Summary

Blood group of child

Any Medical history of the child
(if yes, attach the prescription/report) Yes No

Instruction

Please submit the following along with the form

- 3 Passport size photograph of the child and one of each parents duly affixed
- A photocopy of the Birth Certificate issued by the Municipal Corporation/ Civic Authorities.
- A photocopy of Aadhar Card of the Child
- Blood Group Report of child
- A photocopy of residential proof (Copy of Ration Card / Voter’s ID / passport)
- School Leaving Certificate

CERTIFICATE FROM PARENTS

I hereby certify that to the best of my knowledge, the information given above is correct. I fully understand that the School on accepting the registration form of my ward is not in any way, obliged to grant admission . Also agree that the decision of the school regarding admission will be final and binding on me.

Date

Signature of Father

Signature of Mother

Please affix Father's Photograph here

Please affix Child's Photograph here

Please affix Mother's Photograph here