



OXFORD WORLD SCHOOL

Opposite Panchshil Towers, Kharadi Annex, Wagholi, Pune-412207

Email: info@oxfordworldschool.com / www.oxfordworldschool.com

Landline: 020-65796363 Mobile: 8552026363

Affix student's
passport size
photograph

ADMISSION FORM

Form No.

To be filled by Parent / Guardian (in BLOCK LETTERS). Tick (✓) in the relevant box wherever applicable.

Class in which admission sought Date of Admission / /

STUDENT INFORMATION

Full name of the student :

Sex : Male Female Religion _____ Caste _____ Mother Tongue _____

Category : Gen. SC ST OBC Minority Aadhar No _____

Passport No. : _____ Date of issue: _____ Blood Group: _____

Date of Birth (in figures) : / / Age (as on date) / /
Day Month Year Year Month Day

Birth Place: _____ Taluka: _____ District: _____ State: _____ Nation: _____

ADDRESS FOR CORRESPONDENCE

Residential Address (Correspondence)

City State

Country Pin

Residence ISD Code _____ Tel.

Office STD Code _____ Tel.

Mobile

Residential Address (Permanent)

City State

Country Pin

Residence ISD Code _____ Tel.

Office STD Code _____ Tel.

Mobile



FAMILY INFORMATION

FATHER

MOTHER

FATHER:

Name

Academic Qualification

Occupation

Office Address

City _____ State _____

Office Telephone No

Annual Income

Mobile

Email

Specimen Signature

MOTHER:

Name

Academic Qualification

Occupation

Office Address

City _____ State _____

Office Telephone No

Annual Income

Mobile

Email

Specimen Signature

Medical History of the child (Has your child suffered from any major illness) : Yes / No

If so, nature of illness ? _____

It will be the personal responsibility of the parent to inform the school in writing, if the student is undergoing any medical treatment / medical ailment / allergies etc

Details of previous school:

Name	Place	Affiliated to Board

Reason for withdrawal _____

Areas in which parents (Father/Mother) could contribute to enrich school life in terms of time, skill etc.

- Cultural Medical Media Professional Sports Academic

Particular of brother/sister of the child

S.No	Sister/Brother's Name	Name of school where studying	Age	Class
1.				
2.				



Enclosures: (Please Tick)

- Five recent passport size photographs of the child
- Two passport size photographs each of mother and father
- Original Childs Birth certificate
- Photocopy of original mark sheet of last exam passed
- Proof of residence
- Attested photocopy of Aadhar card of child
- Attested photocopy of passport of parents & student (if available)
- Category Certificate (ST/SC/OBC/Minority)

DECLARATION

I, hereby, declare that all the information given is correct to the best of my knowledge. Further, I fully understand that the school, on accepting the admission form of my ward, is not bound to grant admission and I also agree that the decision the Principal/School Authorities regarding the grant of admission will be the final and binding on me. I also agree to abide by the rules and regulations of the school applicable from time to time if my ward gets admission.

Signature of Father

Signature of Mother

Signature of Guardian

Please note that the issue of admission form does not ensure admission

FOR OFFICE USE ONLY

Full name of the student _____

Class in which admission sought _____

Admission Granted Not Granted Section Allotted _____

House Allotted _____

Register No. _____ GR NO. _____ UID NO. _____ Academic Year _____

Remarks _____

Admission Co-ordinator's Signature

Date:

Principal's Signature

Date:

