RIVERSTONE INTERNATIONAL SCHOOL

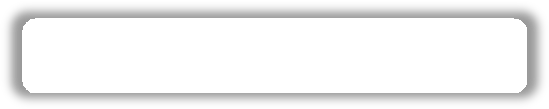
Latest passport size photograph of student

Registration No.

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(For office use only)

Form No. Date of Issue : / /



ADMISSION FORM

Particulars of Student ( IN BLOCK LETTERS ONLY)

Student Name : ( First Name) (Middle Name) (Surname)

Father’s Name : Mother’s Name : \_ Aadhar Card No. :

Date of Birth : / / ( Format DD/MM/YYYY ) e.g. 27/02/2001

(IN WORDS) :

Place of Birth : Physical Disability ( If any) :

Caste : Religion :

Category : Mother Tongue :

Name of the school last attended : \_ Standard to which admission is sought : Residential Address :

# Medical Information

Blood Group :

# Parent’s/ Guardian’s Details

Identification Mark :

Father’s Name : Mother’s Name :

Qualification : Qualification :

Occupation : Occupation :

Domicile : Annual Income : Office Address :

Domicile : Annual Income : Office Address :

Phone No.: Mobile No. :

Phone No.: Mobile No. :

Email ID : Email ID :

**AFTER FILLING FORM SUBMIT TO** [**enquiry@riverstoneschool.in**](mailto:info@abcd.in) **THIS EMAIL**

To,

The Principal,

RIVERSTONE INTERNATIONAL SCHOOL,

Pune.

This is to request you to admit my daughter/ son to your school. We agree to abide by all rules of the school That will be in force from time to time. We shall be responsible for the payment of all the dues of the school. We hereby declare that the information given above is true to the best of our knowledge and belief.