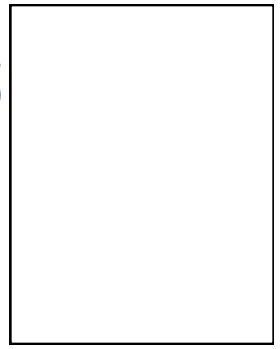




FOSTER ENTERPRISES

No. 79, Srinivasa Complex, 1st Main Road, Sheshadripuram,
Bangalore - 560020

info@fosterenterprises.co.in



ADMISSION TO CLASS					
	FIRST		MIDDLE		LAST
NAME					
DATE OF BIRTH	IN FIGURES		IN WORDS		AGE
DD/MM/YYYY					
GENDER	MALE	NATIONALITY		RELIGION	
	FEMALE			CASTE	
PRESENT ADDRESS					
PERMANENT ADDRESS					
HOBBIES					
AWARDS AND MERITS IF ANY					
	FATHER			MOTHER	
NAME					
QUALIFICATION					
OCCUPATION					
DESIGNATION					
ANNUAL INCOME					
OFFICE ADDRESS					
PHONE NO					
EMAIL ID					

GUARDIAN DETAILS (If child is not living with parents)

NAME	
QUALIFICATION	
OCCUPATION	
ANNUAL INCOME	
RELATIONSHIP WITH THE PUPIL	
ADDRESS	
PHONE NO	
EMAIL ID	
SIGNATURE	

PUPIL LIVES WITH	FATHER	TYPE OF FAMILY	JOINT	
	MOTHER		NUCLEAR	
	BOTH	MOTHER TONGUE		
	OTHER	OTHER LANGUAGES KNOWN		

SIBLINGS	NAME	AGE	GENDER	CLASS	SCHOOL

DETAILS OF PREVIOUS SCHOOL ATTENDED

NAME OF THE SCHOOL LAST ATTENDED	
CLASS	

BOARDING DETAILS

TYPE OF BOARDING: WEEKLY FULL TERM

EXPECTED DATE OF JOINING: _____

HEALTH INFORMATION									
BLOOD GROUP									
IMMUNIZATION STATUS	BCG	DPT	DT	ORAL POLIO	MEASLES/MMR	TYPHOID	CHOLERA	HEPATITIS B	
	OTHER IMMUNIZATIONS (IF ANY):								
PREVIOUS HEALTH HISTORY									
ALLERGIES, IF ANY									
SIGNATURE OF THE PHYSICIAN WITH SEAL									
<p>I grant permission for the school nurse to administer non-prescription medicines - antipyretic, anti-allergic, and antispasmodic. I also grant permission to administer first aid till such time the parent/guardian can pick up the student from the boarding. Foster Enterprises will not be held responsible for any complications arising out of lack of information or awareness of pre-existing illness/allergies.</p>									
								_____	SIGNATURE
DECLARATION FORM									
<ul style="list-style-type: none"> • I/We, _____ (Father/Mother/Guardian), hereby declare that the information provided in this application form is true and correct to the best of our knowledge. • I/We understand and agree to abide by all the rules and regulations of Foster Enterprises Boarding Facilities and the associated School. • I/We understand that failure to comply with the rules may result in cancellation of a boarding facility without refund as per policy. • I/We declare that all previous medical and psychological histories are correctly reported on the Admission Form. • I/We agree to pay the applicable fee on time and to abide by the payment options outlined in the fee schedule. • I/We fully understand that the amount paid towards admission is non-refundable. • I/We understand that in serious instances of breach, e.g. bodily harm to other students/teachers, damage to school property, the student may be asked to leave the boarding. • I/We acknowledge that the boarding will not be responsible for loss/damage of any personal belongings brought to boarding facility by the student. • All students are required to return any material/book etc borrowed from the boarding, before they leave the premises. • I/We will not use social media to send abusive messages to/about parents or teachers, post defamatory status about parent/student/teacher/school/boarding or use social media to complain or post any grievances about the institution's values and methods. 									
SIGNATURE OF FATHER			SIGNATURE OF MOTHER			SIGNATURE OF GUARDIAN			
DOCUMENTS SUBMITTED									

INDEMNITY BOND

- I/We, _____(Father/Mother/Guardian), residing at _____, do hereby undertake and agree as follows:
- That my/our child _____ is voluntarily enrolled in Foster Enterprises Boarding Facilities.
- That I/We understand boarding involves shared living arrangements and routine physical activities.
- That I/We shall not hold Foster Enterprises Boarding Facilities, its management, staff, or associated School responsible for:
 - Minor injuries, illness, or unforeseen incidents occurring during regular activities.
 - Loss of personal belongings not officially deposited.
- That in case of medical emergency, I/We authorize Foster Enterprises to arrange necessary treatment, including hospitalization if required.
- That I/We agree to indemnify and keep indemnified Foster Boarding Facilities and the associated School against any claims, damages, or liabilities arising due to non-disclosure of medical or behavioral conditions of my/our child.
- That I/We agree to promptly clear all dues including boarding fees, damage charges, or medical expenses.
- That this indemnity bond shall remain valid for the entire duration of my/our child's stay in the boarding facility.

SIGNATURE OF FATHER	SIGNATURE OF MOTHER	SIGNATURE OF GUARDIAN

OFFICE USE

CLASS TO WHICH PUPIL IS ADMITTED	ADMISSION NO.	ID NO.	RECEIPT NO.	DATE

INSTRUCTIONS TO FILL THE FORM

1. Form to be filled up in BLOCK LETTERS.
2. The following to be submitted along with the filled form-
 - a. 3 Nos. passport size photograph of the child.
 - b. 2 Nos. passport size photograph of parents/guardian and photo of full family together.
 - c. Photocopy of the birth certificate issued by civic authorities/municipal corporation.
(Original to be produced for verification)
 - d. Photocopy of the child's Aadhaar card.