



Any sibling in the school (Yes/No) if Yes Name & Class \_\_\_\_\_ No. of Children \_\_\_\_\_

Sex (Male/Female) \_\_\_\_\_ Caste/Category (SC / ST / OBC / GEN) \_\_\_\_\_

Languages Known : 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Name of the previous school : \_\_\_\_\_ City \_\_\_\_\_

Class \_\_\_\_\_ Result \_\_\_\_\_ Passing Year \_\_\_\_\_ Percentage \_\_\_\_\_ Total Marks \_\_\_\_\_

Reason to leave school \_\_\_\_\_

Particular academic strengths of the boy : \_\_\_\_\_

(Please specify subjects of interests : \_\_\_\_\_

Interest & activity) \_\_\_\_\_

Other interest of the boy : eg. Art, Music, Sport \_\_\_\_\_

(Please specify standard & interest) \_\_\_\_\_

Specify illness / Allergy (if any) \_\_\_\_\_

Name of the Family Doctor \_\_\_\_\_ Mobile No. \_\_\_\_\_

This application must be accompanied with a xerox copy of the birth certificate of the candidate, as issued by the village or municipal authorities, or by the head of a registered nursing home, or by the medical practitioner who delivered the child (with his/her medical council registration number). No affidavits or school certificates are acceptable. The registration fee may also be paid online : <http://www.venuspublicschool.org> online payment.

I \_\_\_\_\_ hereby confirm that the above mentioned information is correct as per my knowledge and if it is found incorrect, the admission sought will be treated as cancelled and no refund will be given.

**Admission Incharge**

**Parent's Signature**

Name of Student : \_\_\_\_\_

Admission Class : \_\_\_\_\_

Father's Name : \_\_\_\_\_

Mother's Name : \_\_\_\_\_

Date of Interaction : \_\_\_\_\_

Time : \_\_\_\_\_