

Budding Learners

South Wing, Jnana Sweekar Campus
Kanakapura Main Road, Thalaghattapura, Bangalore - 560 109.
Phone: 080-28427472/73 | Mobile : 96118 11266
Email: info@jnanasweekar.com www.jnanasweekar.com

Please affix recent passport size photograph

APPLICATION FOR REGISTRATION

| Application No Admission | No Date |
|---|--|
| GENERAL INFORMATIONUse black ball pen to fill the formFill up in block letters only | Grade for which admission is sought |
| | Kindergarten Nursery Lower Upper Kindergarten Kindergarten |
| | Montessori Montessori Montessori 1 2 3 |
| Name of the student | |
| Gender : Male Female Date of Birt | h (in figures) |
| Date of Birth (in words) | |
| Place of BirthNationalit | yReligion |
| CastePlease Tick S | C ST Mother Tongue |
| Blood GroupAge as on 1st Jur | ne 20yearsmonths |
| Name of the sibling, school & class studying in | |
| J. J. J | |
| Father's Name / Guardian's Name | Mother's Name |
| Educational Qualification | Educational Qualification |
| | |
| Profession | Profession |
| Organisation & Address | Organisation & Address |
| | |
| Annual Income | Annual Income |
| Mobile No | Mobile No |
| Email ID | Email ID |

| Residential Address | | |
|---|---------------------|--|
| | | |
| | | |
| Whether School Conveyance is required (Please tick) Yes No | | |
| Preferred Phone Number for School SMS | | |
| ACADEMIC RECORD | | |
| Name & Address of the School last attended | | |
| Traine a riadross of the consortast attended | | |
| Does your child have any disability Yes No | | |
| Any evidence of Learning disability Yes No | | |
| ADMISSION INFORMATION | | |
| PLEASE ENCLOSE THE FOLLOWING ALONG WITH THIS APPLICATION | | |
| 1. 1Passport size photograph. | | |
| 2. Copy of Birth Certificate of student. | | |
| 3. Copy of Aadhar Card of student. | | |
| 4. Copy of Aadhar Card of Father. | | |
| 5. Copy of Aadhar Card of Mother | | |
| • INCOMPLETE FORM WILL BE REJECTED | | |
| • Please note that registration for admission does not ensure an admission. | | |
| Admission is granted based on merit and availability of seats. | | |
| There will be an increase in Fee every year. | | |
| I have read the rules and regulations of Budding Learners and | | |
| I fully agree to abide by them as long as my child is a student there. | | |
| Date of Submission: | | |
| | | |
| Signature of Father / Guardian | Signature of Mother | |
| FOR OFFICE USE ONLY | | |
| | | |
| Admission Incharge | Principal | |