



Budding Learners

learn with fun

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 INFORMATION

- Use black ball pen to fill the form
- Fill up in block letters only

Grade for which
admission is sought

Foundation
Level-1

Foundation
Level-2

Foundation
Level-3

Name of the student _____

Gender : Male ☐ Female ☐ Date of Birth (in figures)

Date of Birth (in words) _____

Place of Birth _____ Nationality _____ Religion _____

Caste _____ Please Tick SC ☐ ST ☐ Mother Tongue _____

Blood Group _____ Age as on 1st June 20 _____ years _____ months

Name of the sibling, school & class studying in _____

Father's Name / Guardian's Name

Educational Qualification _____

Profession _____

Organisation & Address _____

Annual Income _____

Mobile No. _____

Email ID _____

Mother's Name

Educational Qualification _____

Profession _____

Organisation & Address _____

Annual Income _____

Mobile No. _____

Email ID _____

Residential Address _____

Whether School Transport Facility is required (Please tick) Yes ☐ No ☐

Preferred Phone Number for School SMS _____

ACADEMIC RECORD

Name & Address of the School last 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. One Passport size photograph.
2. Copy of Birth Certificate of student.
3. Copy of Aadhar Card of student.
4. Copy of Aadhar Card of Father & Mother

RULES & REGULATIONS

- 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