

FOR OFFICE USE ONLY				
Date of receipt of application:				
Serial Number:				
APPLICATION FOR ADMISSION TO STD. 1 (2024-25) PLEASE TYPE IN ALL PARTICULARS OR WRITE IN INK USING BLOCK CAPITALS The applicant is: (Please tick relevant box/boxes) a. A sibling of an Aditi student.*	Attach one recent colour photograph (taken in the last 3 months)			
c. The child of a full-time Faculty/Staff of Aditi.* d. Other *admission under these categories is not guaranteed and may not be demanded as a m	matter of right.			
Attempts to influence/pressurize admission decisions through letters and/o applicants will not be appreciated and will lead to immediate rejection of the second se				
The number of seats available is very limited. Parents are advised to apply institutions.	widely to other			
The Principal will not be meeting parents in connection with admission to	Std.1.			
THIS FORM CONTAINS <u>FIVE</u> PRINTED PAGES.				
LAST DATE FOR SUBMISSION OF THIS FORM: Monday, March 11, 2024 by 3.00 p.m				
LATE APPLICATIONS WILL NOT BE ACCEPTED.				

IMPORTANT INFORMATION:

- Readiness Interview for students seeking admission to Std.1 will be conducted in school on <u>Tuesday</u>, <u>April 2</u>, <u>2024</u>. Timings will be intimated via email. There is no option of taking this interview online or on another date.
- Kannada will be the mandatory Second Language for ALL students.
- School transport may be available only if there is a vacancy (even for siblings) on the bus that services your area of stay.
- Given Bangalore traffic conditions, applicants whose residence is very far from school are advised not to apply.

PLEASE FILL IN TH	IIS FORM IN C	APITAL LETTERS ONL	Y
1. Name of Appli Please enter th		th Certificate / Aadhaar C	Card / Passport):
	First	Middle	Last
2. Gender: FEM	ALE	MALE	
3. Date of Birth: (According to Birth Co	ertificate)	D M	Y
(Date of Bir	th should fall b	etween September 1, 2017	7 and August 31, 2018)
4. Place of Birth:			
T	own	State	Country
5. Nationality According	ng to Passport: _		
6. Residential Address	:	Phone: _	

a) Modile	b) Phone:
c) E-mail:	d) Nationality:
Profession/Occupation:	
Educational Qualification/s:	
O. Position Held:	
1. Name of Organisation:	
2. Office Address:	
Office Phone No:	
3. Father's Name (as per Aadhaar Card or	r Passport):
a) Mobile:	b) Phone:
a) Mobile: c) E-mail:	
c) E-mail:	d) Nationality:
	d) Nationality:
c) E-mail:4. Profession/Occupation:	d) Nationality:
c) E-mail:4. Profession/Occupation:5. Educational Qualification/s:	d) Nationality:

19. Guardian's Name:		
a) Mobile:		
c) E-mail:		
20. Relationship to the applicant:		
21. Profession/Occupation:		
22. Educational Qualification/s:		
23. Position Held:		
24. Name of Organisation:		
25. Office Address:		
26. If sibling/s already enrolled in/graduated fr		
If Parent/s is/are Aditi Alumnus/Alumna/Alumplease provide details:	nni/or a full-time Faculty/Staff Me	mber of Aditi,
27. Previous Schools Attended (Location, Dates At	ttended)	
Name of School	Class	Year

	ties/academic needs the school should be aware of?
Copies of relevant reports may also be	e attached.
IMPORTANT : Provide one email id and	mobile number for <u>ALL admission-related communication</u> :
Email id:	
Mobile Number:	
Signature of Parent:	Date:

HOW TO SUBMIT THIS FORM:

Download this form. Fill out all five pages. **Submit the scanned copy to the following email id:** std1admissions2024@aditi.edu.in

The form can be submitted from Monday, March 4, 2024 to Monday, March 11, 2024, by 3 p.m.

Forms received after the due date and time WILL NOT BE ACCEPTED.

All correspondence regarding admissions to Std. 1 <u>including acknowledgement of the application form</u> being received will be sent from <u>std1admissions2024@aditi.edu.in</u>

All correspondence will be sent to the email id submitted by the parent/guardian for the same.

It is the responsibility of the parents/guardian to check their mails regularly. No reminders will be sent or calls made from school.