



GALAXY ENGLISH MEDIUM SCHOOL

(Managed by: Galaxy Education Society, Fudam – Diu)

Phone: 02875 – 254399 , 9429362899

CBSE AFFILIATION NO: 3130002

SCHOOL CODE: 31902

SCHOOL UDISE CODE : 25010100705

E-mail: galaxyschooldiu@yahoo.com

ADMISSION FORM Academic Year 2023-24

Photo

Sr. No. _____

Admission No. _____ (to be filled by office.)

CLASS to which admission sought : _____ Session : _____

PERSONAL DETAILS:-

1. Name: _____

2. Gender: Male Female Any other

3. D.O.B.: Date _____ Month _____ Year _____

In words _____

4. Place of Birth: _____ Blood Group: _____

5. Bank Account No: _____ IFSC Code: _____

6. Mother Tongue: _____

7. Details of Parents:-

Father's Name: _____ Single Parent – Yes / No

Mother's Name: _____ Single Parent – Yes / No

Father's Qualification: _____ Mother's Qualification: _____

Father's Occupation: _____ Mother's Occupation: _____

Father's E-mail: _____ Mother's E-mail: _____

Father's Annual Income: _____ Mother's Annual Income: _____

Mobile No. 1: _____ Mobile No. 2: _____

Residential Address: _____

_____ Pin Code: _____

8. Whether the candidate is:-

(i) Single Girl Child: Yes No

(ii) Specially abled (Divyangjan): Yes No

(iii) Belonging to the EWS: Yes No

9. Religion: _____

Caste: _____

10. Category: (Attach proof): Gen SC ST OBC
11. Minorities: Muslim Christian Buddhist Jain Sikh
12. Student Aadhaar No. (Attach proof): _____
13. Name & Address of the last attended school: _____

14. Class last attended: _____
15. Last School affiliated is
(i) CBSE (ii) Any other (please specify) _____
16. Result of the Previous Academic Year:

Subject	Maximum Marks	Marks obtained	% of Marks	Remarks

17. Transfer Certificate Details:-

Transfer Certificate No: - _____ Date of Issue :- _____

18. Details of siblings (if any)

	Brother / Sister	Age	School studying in
Name			
Name			

SELF MEDICAL DECLARATION

I hereby declare that, my child _____ is not having any medical conditions or had not undergone any medical treatments for the past 12 months. If yes, I am ready to submit the medical documents as well as fitness certificate along with the further supported documents at the time of admission form submission.

DECLARATION

I hereby declare that the aforementioned information including Name of the Candidate, Father's/Guardian's Name, Mother's name and Date of Birth furnished by me is correct to the best of my knowledge & belief. I shall abide by the rules of the School.

Date: _____

Signature of the Parents(s)/Guardian

Place: _____

Relation with candidate _____

*In case, student is from other board, Transfer Certificate should be countersigned by the Competent Authority.

PLEASE ATTACH FOLLOWING DOCUMENTS ALONG WITH ADMISSION FORM	
<ul style="list-style-type: none">• Birth Certificate in English (Original for Class 1)• Original Leaving Certificate (Last School)• 4 Passport size Photographs• Progress Report Copy (Last School)• Attach proof wherever applicable	<ul style="list-style-type: none">• Copy of Bank passbook (Student, Father & Mother)• Copy of Aadhaar Card (Student, Father & Mother)• Student's Blood group Card• Caste Certificate• Father's Photo• Mother's Photo

❖ Admission form fee is non - refundable.

FOR OFFICE PURPOSE ONLY

Principal Remarks: _____

FOR OFFICE USE ONLY

ADMITTED: YES / NO	ADMITTED IN STD:	DATE OF ADMISSION:
ADMISSION GRANTED BY	CLERK	PRINCIPAL SIGNATURE