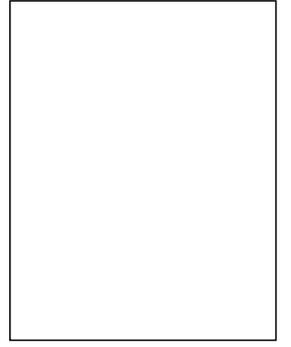




# INDITE PUBLIC SCHOOL

## ADMISSION FORM



Paste Photo Here

### Student Information:

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

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

Previous School: \_\_\_\_\_

### Parent/Guardian Information:

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

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

Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

*Declaration: I hereby declare that the information provided above is true to the best of my knowledge. I agree to abide by the rules and regulations of Indite Public School.*

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_