

BEACON HIGH SCHOOL

(International Curriculum – Cambridge)

ADMISSION APPLICATION FORM

Section A: Student Information	
Full Name of Student (as per passport/birth certificate):	
Preferred Name:	
UDISE Number:	
Date of Birth (DD/MM/YYYY):	//
Place of Birth (City, Country):	
Nationality:	
Gender:	☐ Male ☐ Female
First Language / Mother Tongue:	
Other Languages Spoken at Home:	
Applying for Grade:	(Academic Year: 20 – 20)
Previous Curriculum Studied:	☐ Cambridge ☐ CBSE ☐ ICSE ☐ Other:
Previous School Name:	

Section B: Family Information		
Father / Guardian		
Full Name:		
Nationality:		
Qualification:		

Occupation & Organization:	
Designation:	
Contact Number:	
Email Address:	
Mother / Guardian	
Full Name:	
Nationality:	
Qualification:	
Occupation & Organization:	
Designation:	
Contact Number:	
Email Address:	
Primary Contact Person for School Communication:	☐ Father ☐ Mother ☐ Guardian
Section C: Residential Information	
Section C: Residential Information Residential Address:	
	Country:
Residential Address:	Country: Home Telephone:
Residential Address: City:	,
Residential Address: City: Postal Code: Preferred Mobile Number for SMS/WhatsApp	,
Residential Address: City: Postal Code: Preferred Mobile Number for SMS/WhatsApp	,
Residential Address: City: Postal Code: Preferred Mobile Number for SMS/WhatsApp updates:	,
Residential Address: City: Postal Code: Preferred Mobile Number for SMS/WhatsApp updates: Section D: Additional Information Does the student have any medical conditions,	Home Telephone:
Residential Address: City: Postal Code: Preferred Mobile Number for SMS/WhatsApp updates: Section D: Additional Information Does the student have any medical conditions, allergies, or learning needs?	Home Telephone:
Residential Address: City: Postal Code: Preferred Mobile Number for SMS/WhatsApp updates: Section D: Additional Information Does the student have any medical conditions, allergies, or learning needs? If yes, please specify: Sibling(s) currently studying at Beacon High	Home Telephone:

Section E: Required Docume	ntation			
☐ Birth Certificate / Passport (for proof of age & nationality)				
☐ Previous School Records / Transfe	r Certificate			
☐ Immunization / Medical Records				
☐ Student Passport-size Photograph	s (4 copies)			
☐ Parent/Guardian ID Proof (2 copie	s each)			
☐ Address Proof/Aadhar Card				
Section F: Parent / Guardian	Declaratio	n		
 I/We hereby declare that the details provided in this form are accurate and complete. I/We understand that: Admission is subject to the school's assessment, availability of seats, and verification of documents. Any false information may lead to cancellation of admission. I/We agree to abide by the school's policies, rules, and regulations. 				
Signature of Father/Guardian:		Date:		
Signature of Mother/Guardian:		Date:		
Section G: For Office Use On	ly			
Reg No:	Year:		Gr No:	