

OUR INDIA INTERNATIONAL SCHOOL

Kairana Road, Kandhala, District-Shamli (UP) Pin Code - 247775

7820 015 113 ourindiainternationalschoolkdl@gmail.com www.ois.in | UDISE Code - 09741800163

Affiliated to CBSE, New Delhi | School Code 61562 | Affiliation No. 2133935

Registration cum Admission Form Part – I (2026-27)

Application No. _____

Full Name of the Student _____

Aadhaar No. _____

Nationality _____ Religion _____ Caste _____

Gender _____ Mother tongue _____

Date of birth _____ Place of birth _____ Blood group _____

Third language _____ Emergency contact _____

ADMISSION AND PREVIOUS SCHOOL DETAILS

Admission for _____ Academic year _____

Class last studied _____ Board last studied _____

Date of leaving school _____ Stream (required in xi class only) _____

FATHER DETAILS

Father's first name _____ Father's last name _____

Father's nationality _____ Father's DOB _____

Father's caste _____ Father's religion _____

Father's occupation _____ Father's qualification _____

Father's annual income _____ Father's mobile _____

Father's email _____ Working in this school (YES/NO)

Father employer name _____ Father's employer address _____

MOTHER DETAILS

Mother's first name _____ Mother's last name _____

Mother's nationality _____ Mother's DOB _____

Mother's religion _____ Mother's caste _____

Mother's occupation _____ Mother's qualification _____

Mother's Mobile _____ Mother's working in this school (YES/NO)

Mother's employer's name _____ Mother's employer address _____

CONTACT DETAILS

Permanent address _____

State _____ City _____ Country _____ Mobile no _____ Pin code _____

Commutative Address: _____

INSTRUCTIONS

PLEASE VERIFY THE ENTRIES BEFORE SUBMISSION TO SCHOOL. PLEASE MAKE SURE THAT THE ENTRIES ARE MADE AS PER THE AADHAR CARD/OTHER DOCUMENTARY PROOF.

Passport
Size
Photo

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ADMISSION FORM PART – II (2026-27)

NAME OF THE STUDENT (As per Aadhar): _____

NAME AND ADDRESS OF SCHOOL LAST ATTENDED:

MEDIUM OF INSTRUCTION:

CLASS LAST STUDIED:

RESULT:

DATE OF LEAVING:

DETAILS OF OTHER CHILDREN ALREADY STUDYING/STUDIED IN THIS SCHOOL

S. NO.	STUDENT NAME	ENROLMENT NO.	CLASS & SECTION
1			
2			
3			
4			
5			

REQUIRED DOCUMENTS ATTACHED YES/NO

TC ATTESTED ATTACHED YES/NO

MARKS STATEMENT ATTACHED YES/NO

DECLARATION

I understand the rule and regulations of the school. I agree to abide by the same, as well as changes, if any, made there in subsequently. I am also aware that concealment of any fact will render this admission null and void, whenever detected by the school.

Signature of Parent/Guardian

For Office Use Only

Regular Admission /Provisional Admission granted to class §ion:

The following to be checked by concerned official.

1. Original TC of previous school (Attached)
2. Copy of marks statement (Attached)
3. Copy/Original Registration Receipt (Attached)

Signature of Admission I/C

Signature of Principal

New Admission	Transfer from other school	Re-Admission
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Enrolment no. _____ level: _____ Category: _____

Signature of dealing Clerk

Father's
Passport
Size
Photo

Mother's
Passport
Size
Photo

OUR INDIA INTERNATIONAL SCHOOL

UNDERTAKING BY PARENTS

NAME OF THE STUDENT:

ADMISSION No.:

CLASS:

SECTION:

1. I/We undertake that we agree to abide by the rules & regulations of the school.
2. I/We have gone through the schedule of fees, and accept the same. I/We will deposit the fees in full in accordance with the payment schedule. I/We also understand that if the school fees are not paid by the due date, the school may undertake measures as per the recovery protocols set by the school.
3. I/We understand that the school has designed curriculum and time-table with the best interest of the students and I/We will not interfere in their implementation.
4. I/We shall ensure that my ward attends School on time (online and/or in-person) and participates in the activities and classes set in the class time-table regularly.
5. I/We hereby undertake that in case of expulsion of my ward due to disciplinary action, misconduct or any other grounds, the decision of the authorities shall be final and binding in this regard and we will not claim refund/compensation for the lost school hours.
6. I/We undertake that my ward will respect the cultural and ethnic diversity of the students studying in the school.
7. I/We understand that in case of emergency or under unavoidable circumstances if my ward carries any mobile phone/smart phone will be placed in safe custody by the school and handed over to my ward at the time of discharge at end of school hours. My ward will only carry books as per school rules and no unauthorized articles/items while entering the school premises.
8. I/We and/or family members shall visit school only during the specified visiting hours for parents/guardians.
9. I/We confirm that my ward will not be sent to School in-person if he/she is indicating any illness/medical issues. I/We understand that the school can send my ward back home owing to medical reasons, and they hold no responsibility in such cases.
10. I/We assure our full cooperation to the school authorities and ensuring that my/our actions are always in the interest of the school.
11. I/We undertake to adopt the redressal channels to raise any grievances and will not indulge in any activity that causes disrepute to the school and/or the functionaries entrusted with the responsibility of managing or other stakeholders.
12. I/We undertake to keep the school updated on relevant information relating to my/our/ward.

Date:

Signature of Father

Signature of the Mother

Name: _____

Alternate Contact: _____

Contact Number: _____

Email addresses: _____