

Please affix a recent photograph of the child.  
Size-2.5cm x 3.5 cm



Sr. No.: \_\_\_\_\_  
AY: \_\_\_\_\_  
Gr. No.: \_\_\_\_\_

**ADMISSION FORM**

|  |            |                        |                               |
|--|------------|------------------------|-------------------------------|
| Miss/Master  | First Name | Middle Name            | Last Name                     |
| Date of Birth<br>MM / DD / YY  |            | Date of Birth in words |                               |
| Blood Group  |            |                        |                               |
| <b>Eligible for admission to</b> <input type="checkbox"/> MTP <input type="checkbox"/> TTP <input type="checkbox"/> PSY 1 <input type="checkbox"/> PSY 2 <input type="checkbox"/> PSY 3 <input type="checkbox"/> PSY 4 <input type="checkbox"/> Grade I<br><input type="checkbox"/> Grade II <input type="checkbox"/> Grade III <input type="checkbox"/> Grade IV <input type="checkbox"/> Grade V <input type="checkbox"/> Grade VI <input type="checkbox"/> Grade VII <input type="checkbox"/> Grade VIII <input type="checkbox"/> Grade IX <input type="checkbox"/> Grade X<br><input type="checkbox"/> Grade XI <input type="checkbox"/> Grade XII   Stream: <input type="checkbox"/> Humanities <input type="checkbox"/> Commerce <input type="checkbox"/> Science   Board: <input type="checkbox"/> CBSE <input type="checkbox"/> ICSE <input type="checkbox"/> CAIE |            |                        |                               |
| Current Residential Address:   |            |                        |                               |
| City:  | State:     | Nationality:           | Pin Code:      Residence No.: |
| Languages spoken at home:  |            | Religion:              | Caste:                        |
| Name of the previous school attended:  |            |                        |                               |
| Any special learning needs (Please state in detail. This information will help us in assisting your child):  |            |                        |                               |
| In case of an adopted child, kindly attach a certified copy of the adoption certificate:   Applicable <input type="checkbox"/> Not Applicable <input type="checkbox"/>   |            |                        |                               |

**Family Information**

|                                    |             |   |
|------------------------------------|-------------|---|
| <b>Mother's Name:</b>              |             | <div style="border: 1px solid black; padding: 5px; text-align: center;">         Please affix a recent photograph.<br/>Size-2.5cm x 3.5 cm       </div> |
| Qualification(s):                  | Occupation: |   |
| Name of the Organisation/Employer: |             |   |
| Designation:                       | Mob No.:    |   |
| Address (Business/Office):         |             |   |
| Bus/Off No.:                       | Email:      |   |

**Family Information**

|                                    |             |   |
|------------------------------------|-------------|---|
| <b>Father's Name:</b>              |             | <div style="border: 1px solid black; padding: 5px; text-align: center;">         Please affix a recent photograph.<br/>Size-2.5cm x 3.5 cm       </div> |
| Qualification(s):                  | Occupation: |   |
| Name of the Organisation/Employer: |             |   |
| Designation:                       | Mob No.:    |   |
| Address (Business/Office):         |             |   |
| Bus/Off No.:                       | Email:      |   |



Campus 1 : 47, Sampat Farms, Behind Zodiac Mall, Pipliyahana, Indore  
 Campus 2 : 1, Dubey Colony, Manik Bagh Road, Palsikar, Indore  
 Campus 3 : AC-19, Sector- A, Scheme No. 54, Vijay Nagar, Indore



MGI Campus, Behind Aurodindo Hospital  
 Sanwer Road, Indore (M.P.)  
[www.billabongindore.com](http://www.billabongindore.com)

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**Family Information**

|                                    |        |             |  |
|------------------------------------|--------|-------------|--|
| Qualification(s):                  |        | Occupation: |  |
| Name of the Organisation/Employer: |        |             |  |
| Designation:                       |        | Mob No.:    |  |
| Address (Business/Office):         |        |             |  |
| Bus/Off No.:                       | Email: | Signature:  |  |

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**Relationship Status:**

Married     
  Single     
  Separated     
  Divorced

If separated, legal custody of the child is with:  Mother       Father       Guardian

**Sibling Information:**

My son/daughter is/was enrolled at \_\_\_\_\_ Grade \_\_\_\_\_

My son/daughter is/was enrolled at \_\_\_\_\_ Grade \_\_\_\_\_

**What influenced you to make Billabong High International School the final choice for your child/children?**

School vision and philosophy       Curriculum  
 Support programme for children       School Infrastructure  
 Location of the school       Student-Teacher ratio  
 Parent/Friend recommendation       Approach/Attitude of the school staff  
 Approach of the admission officer       Extended learning opportunities (Special days, field trips and other events)

**Any others:** \_\_\_\_\_

**Checklist of documents to be submitted with the Admission Form. Tick ( ) as applicable**

| Sr. No. | Particulars  | Yes | No | Not Applicable | Remarks |
|---------|--|-----|----|----------------|---------|
| 1       | 1 photograph each of the child, parents and guardian (to be pasted on the form)                            |     |    |                |         |
| 2       | 1 copy of the birth certificate  |     |    |                |         |
| 3       | 1 copy of the report card of the previous school/s (if applicable)   |     |    |                |         |
| 4       | 1 photocopy of the address proof   |     |    |                |         |
| 5       | 1 copy of the child's passport and one of each parent (in case of Foreign Nationality/Non-Resident Indian) |     |    |                |         |
| 6       | Copy of Aadhaar Card   |     |    |                |         |
| 7       | Original School Leaving Certificate of the previous school   |     |    |                |         |

**FOR OFFICE USE**

Submission date of form: \_\_\_\_\_ Fee Receipt Number: \_\_\_\_\_

Admission for level: \_\_\_\_\_ Checked and processed by: \_\_\_\_\_

Date of Fee Receipt: \_\_\_\_\_

Signature of Administrator/Coordinator: \_\_\_\_\_

**ACCEPTANCE OF APPLICATION AND ADMISSION**

Signature of Principal: \_\_\_\_\_ Date: \_\_\_\_\_