



OFFICE USE ONLY

APPLICATION NO. GRADE APPLIED FOR DATE
.....

APPLICATION FORM

NAME OF STUDENT(FIRST) MIDDLE LAST
.....
CHILD'S PREFERRED NAME HOME LANGUAGE
.....

PLEASE AFFIX
PASSPORT
PHOTO HERE

STUDENT BIRTH DETAILS
DATE OF BIRTH(DAY) MONTH YEAR
.....
PLACE OF BIRTH(CITY) COUNTRY OF BIRTH
.....
NATIONALITY
.....

FATHER'S DETAILS
NAME OF FATHER(FIRST) MIDDLE LAST
.....
PROFESSION EMPLOYER NATIONALITY
.....

MOTHER'S DETAILS
NAME OF MOTHER(FIRST) MIDDLE LAST
.....
PROFESSION EMPLOYER NATIONALITY
.....

ADDRESSES
HOME ADDRESS FATHER'S MOBILE NO.
.....
MOTHER'S MOBILE NO.
.....
CITY PIN CODE STATE COUNTRY
.....
EMAIL RESIDENCE NO.
.....

STAY
FOR NRI ONLY: NO. OF YRS STAYED ABROAD FOR FOREIGNERS ONLY: EXPECTED LENGTH OF STAY IN INDIA

PREVIOUS SCHOOL
NAME OF SCHOOL PLACE GRADE NO.OF YEARS
.....

ENCLOSURE: FEE STRUCTURE

PARENT/GUARDIAN SIGNATURE DATE

CHECKLIST - Please ensure you have enclosed

1. 2 Passport sized photographs
2. Copy of birth certificate
3. Copy of passport (Foreigners only)
4. Medical Information Sheet
5. Family Information Sheet

PRINCIPAL SIGN DATE



Medical Information Sheet

Name of Student Grade

Physician to be called in case of emergency (name)

Address Phone

Has your child ever had any of the following illnesses? If so, when?

Name	Yes/No	Date	Name	Yes/No	Date
Chickenpox			Epilepsy		
Measles			Tuberculosis		
German Measles			Whooping Cough		
Mumps			Ear condition		
Diphtheria			Operation(name)		
Rheumatic Fever			Asthma		
Heart disease			Allergies		
Poliomyelitis			Serious Injury(name)		
Diabetes Mellitus			Others		
Blood Group					

Has your child had any of the following protective measures? If so, when?

Name	Yes/No	Date	Name	Yes/No	Date
BCG Vaccination			Tetanus		
Polio			Hepatitis A & B		
MMR			Others		

Date of last physical check up

If there is anything wrong with your child, which the school should know please detail it in the space provided. (Include such things as eyesight, allergies any disabilities)

.....
.....

_____ Date

_____ Signature of Parent / Guardian



Head Office:

ANC Preschools, D-602, Aishwarya Lake View Residency, 6th Cross, Kaggadasapura, C.V. Raman Nagar, Bangalore – 560093, Karnataka, INDIA
www.applesncherries.com email: admissions@applesncherries.com Phone: 080 409 91525 Fax: 080 253 43609

Emergency / Family Information Sheet

Please give details of two people to be contacted in case of emergency in order of preference

Name	Relationship	Phone
.....
Name	Relationship	Phone
.....

Please give details of two people (other than parents) authorized to collect child from the school in order of preference

Name	Relationship	Phone
.....
Name	Relationship	Phone
.....

Other children living at home

Name	Relationship	Date of Birth
.....
Name	Relationship	Date of Birth
.....
Name	Relationship	Date of Birth
.....

Please let us know if the child had previous experience away from home?

Where?	Dates of attendance
.....
Were there any special problems?
.....
.....

Date

Signature of Parent / Guardian



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Terms and Conditions

Admission Policy

1. Apples n Cherries Preschool welcomes all children and parents irrespective of race, national origin, religious background or competency in English language.
2. Apples n Cherries Preschool is open for admissions the whole year with the allocation of seats being strictly subject to availability.
3. Minimum age for admission is on a discretionary basis, based on Apples n Cherries Preschool's evaluation of the child and the program being applied for.
4. Internal waiting lists follow a first-cum-first-served basis, with emphasis being given to siblings of children already attending the school.

Terms & Conditions

1. All payments to be made in advance, as per dates specified. Any payment received 5 working days after this date will be considered 'late'.
2. Any break between payments will require the student to be re-registered against a new application.
3. All payments are non-refundable (except refundable Deposit), non-negotiable and non-transferable.
4. Penalties incurred for late collection, late payment or non-payment of any dues will be deducted from Deposit.
5. Payment to be made by cheque or demand draft. No post dated cheques or cash will be accepted unless under exceptional circumstances.
6. Any returned cheques/payments will incur a penalty of Rs. 1,000 per transaction.
7. Statutory taxes as per Government norms - if applicable - will be at actual
8. If you have any queries regarding the above, please contact accounts@applesncherries.com

Date

Signature of Parent / Guardian