



SRI RAMAKRISHNA GURUKULASHRAMA TRUST (R.)
SRI RAMAKRISHNA RESIDENTIAL SCHOOL

ಶ್ರೀ ರಾಮಕೃಷ್ಣ ರೆಸಿಡೆನ್ಸಿಯಲ್ ಸ್ಕೂಲ್, ಎಂ.ಎಲ್. ಹಳ್ಳಿ

(Recognized by Govt. of Karnataka)

M. L. HALLI - 577 401, Sagar Tq. Shimoga Dist. ☎ : 08183-296516

APPLICATION FOR ADMISSION

Affix
Student
Photo

Admission No. _____

Mobile no. _____ Whatsapp no. _____ Date. _____

1. Name of the Student (in block letters) ವಿದ್ಯಾರ್ಥಿಯ ಹೆಸರು ಸ್ಪಷ್ಟವಾಗಿರಲಿ	
2. Date of Birth, Age & Birth Place ಜನ್ಮದಿನಾಂಕ, ವಯಸ್ಸು & ಹುಟ್ಟಿದ ಸ್ಥಳ	
3. Father's Name ತಂದೆಯ ಹೆಸರು	
4. Mother's Name ತಾಯಿಯ ಹೆಸರು	
5. Guardian's Name (if Parent not alive) ಪೋಷಕರ ಹೆಸರು (ತಂದೆ/ತಾಯಿ ಜೀವಂತ ಇಲ್ಲದಿದ್ದರೆ)	
6. Parents /Guardian's Address (Permanent) ತಂದೆ, ತಾಯಿ/ಪೋಷಕರ ಖಾಯಂ ವಿಳಾಸ	Phone: _____ Pin code _____
7. Parent's / Guardian's Postal address ತಂದೆ, ತಾಯಿ/ ಪೋಷಕರ ಅಂಚೆ ವಿಳಾಸ	Phone: _____ Pin code _____
8. Parent's occupation & Annual Income ಪೋಷಕರ ಉದ್ಯೋಗ ಮತ್ತು ವಾರ್ಷಿಕ ವರಮಾನ	
9. Father's, Mother's& Parent's Educational level ತಂದೆ, ತಾಯಿ/ಪೋಷಕರ ವಿದ್ಯಾಭ್ಯಾಸದ ಮಟ್ಟ	
10. Student's Mother Tongue ವಿದ್ಯಾರ್ಥಿಯ ಮಾತೃಭಾಷೆ	
11. Any other Language Known ಮಾತನಾಡುವ ಇತರೆ ಭಾಷೆಗಳು	
12. Class and Medium for which admission is sought ವಿದ್ಯಾರ್ಥಿಯು ಸೇರ ಬಯಸುವ ತರಗತಿ & ಮಾಧ್ಯಮ	
13. Name and address of the school last attended ವಿದ್ಯಾರ್ಥಿ ಹಿಂದೆ ಓದಿದ ಶಾಲೆಯ ಹೆಸರು, ವಿಳಾಸ	
14. Class and Medium of Instruction the student had taken in the last school ಹಿಂದಿನ ಶಾಲೆಯಲ್ಲಿ ವಿದ್ಯಾರ್ಥಿಯು ಓದಿದ ತರಗತಿ ಮತ್ತು ಮಾಧ್ಯಮ	
15. Nationality, Religion and Caste ರಾಷ್ಟ್ರೀಯತೆ, ಧರ್ಮ ಮತ್ತು ಜಾತಿ	
16. Mention, if the student knows other activities ಇತರೆ ಚಟುವಟಿಕೆಗಳಿದ್ದಲ್ಲಿ ತಿಳಿಸಿ	

DECLARATION

We are hereby declaring that the above said particulars are true to the best of our knowledge and we shall strictly obey the rules and regulation of the above instruction.

ಮೇಲೆ ತಿಳಿಸಿದ ಎಲ್ಲಾ ವಿಷಯಗಳು ಸತ್ಯವೆಂದು ಘೋಷಿಸುವುದರ ಜೊತೆಯಲ್ಲಿ ಶಾಲೆಯ ಎಲ್ಲಾ ನಿಯಮಗಳಿಗೆ ಬದ್ಧರಾಗಿರುತ್ತೇವೆಂದು ಪ್ರಮಾಣೀಕರಿಸುತ್ತೇವೆ.

Signature of the Student

ವಿದ್ಯಾರ್ಥಿಯ ಸಹಿ

Signature of the Parent/Guardian

ತಂದೆ/ತಾಯಿ/ಪೋಷಕರ ಸಹಿ

OFFICE USE

Name of the Student

Class Medium.....

Admission No Date.....

Remarks

Signature of the Head master



SRI RAMAKRISHNA GURUKULASHRAMA TRUST (R.)
SRI RAMAKRISHNA VIVEKANANDA RESIDENTIAL SCHOOL

ಶ್ರೀ ರಾಮಕೃಷ್ಣ ವಿವೇಕಾನಂದ ರೆಸಿಡೆನ್ಸಿಯಲ್ ಸ್ಕೂಲ್

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Affix
Student
Photo

APPLICATION FOR ADMISSION

Admission No.

Mobile no. Whatsapp no. Date.

1. Name of the Student (in block letters) ವಿದ್ಯಾರ್ಥಿಯ ಹೆಸರು ಸ್ಪಷ್ಟವಾಗಿರಲಿ	
2. Date of Birth, Age & Birth Place ಜನ್ಮದಿನಾಂಕ, ವಯಸ್ಸು & ಹುಟ್ಟಿದ ಸ್ಥಳ	
3. Father's Name ತಂದೆಯ ಹೆಸರು	
4. Mother's Name ತಾಯಿಯ ಹೆಸರು	
5. Guardian's Name (if Parent not alive) ಪೋಷಕರ ಹೆಸರು (ತಂದೆ/ತಾಯಿ ಜೀವಂತ ಇಲ್ಲದಿದ್ದರೆ)	
6. Parents /Guardian's Address (Permanent) ತಂದೆ, ತಾಯಿ/ಪೋಷಕರ ಖಾಯಂ ವಿಳಾಸ	Phone: _____ Pin code _____
7. Parent's / Guardian's Postal address ತಂದೆ, ತಾಯಿ/ ಪೋಷಕರ ಅಂಚೆ ವಿಳಾಸ	Phone: _____ Pin code _____
8. Parent's occupation & Annual Income ಪೋಷಕರ ಉದ್ಯೋಗ ಮತ್ತು ವಾರ್ಷಿಕ ವರಮಾನ	
9. Father's, Mother's& Parent's Educational level ತಂದೆ, ತಾಯಿ/ಪೋಷಕರ ವಿದ್ಯಾಭ್ಯಾಸದ ಮಟ್ಟ	
10. Student's Mother Tongue ವಿದ್ಯಾರ್ಥಿಯ ಮಾತೃಭಾಷೆ	
11. Any other Language Known ಮಾತನಾಡುವ ಇತರೆ ಭಾಷೆಗಳು	
12. Class and Medium for which admission is sought ವಿದ್ಯಾರ್ಥಿಯು ಸೇರ ಬಯಸುವ ತರಗತಿ & ಮಾಧ್ಯಮ	
13. Name and address of the school last attended ವಿದ್ಯಾರ್ಥಿ ಹಿಂದೆ ಓದಿದ ಶಾಲೆಯ ಹೆಸರು, ವಿಳಾಸ	
14. Class and Medium of Instruction the student had taken in the last school ಹಿಂದಿನ ಶಾಲೆಯಲ್ಲಿ ವಿದ್ಯಾರ್ಥಿಯು ಓದಿದ ತರಗತಿ ಮತ್ತು ಮಾಧ್ಯಮ	
15. Nationality, Religion and Caste ರಾಷ್ಟ್ರೀಯತೆ, ಧರ್ಮ ಮತ್ತು ಜಾತಿ	
16. Mention, if the student knows other activities ಇತರೆ ಚಟುವಟಿಕೆಗಳಿದ್ದಲ್ಲಿ ತಿಳಿಸಿ	

DECLARATION

We are hereby declaring that the above said particulars are true to the best of our knowledge and we shall strictly obey the rules and regulation of the above instruction.

ಮೇಲೆ ತಿಳಿಸಿದ ಎಲ್ಲಾ ವಿಷಯಗಳು ಸತ್ಯವೆಂದು ಘೋಷಿಸುವುದರ ಜೊತೆಯಲ್ಲಿ ಶಾಲೆಯ ಎಲ್ಲಾ ನಿಯಮಗಳಿಗೆ ಬದ್ಧರಾಗಿರುತ್ತೇವೆಂದು ಪ್ರಮಾಣೀಕರಿಸುತ್ತೇವೆ.

Signature of the Student

ವಿದ್ಯಾರ್ಥಿಯ ಸಹಿ

Signature of the Parent/Guardian

ತಂದೆ/ತಾಯಿ/ಪೋಷಕರ ಸಹಿ

OFFICE USE

Name of the Student

Class Medium.....

Admission No Date.....

Remarks

Signature of the Head master



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SRI RAMAKRISHNA VIVEKANANDA RESIDENTIAL SCHOOL

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Affix
Student
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APPLICATION FOR HOSTEL ADMISSION

Admission No. _____

Mobile no. _____ Whatsapp no. _____ Date. _____

1. Name of the Student (in block letters) ವಿದ್ಯಾರ್ಥಿಯ ಹೆಸರು ಸ್ಪಷ್ಟವಾಗಿರಲಿ	
2. Father's Name ತಂದೆಯ ಹೆಸರು	
3. Permanent Address ಖಾಯಂ ವಿಳಾಸ ದೂರವಾಣಿ ಸಂಖ್ಯೆಯೊಂದಿಗೆ	Phone : _____ Pin code _____
4. Immediate Contact Address (if local) ತುರ್ತು ಸಂದರ್ಭದಲ್ಲಿ ಸಂಪರ್ಕಿಸಲು ತಂದೆ/ತಾಯಿಯರ ಸ್ಥಳೀಯ ವಿಳಾಸ ಮತ್ತು ಫೋನ್ ನಂ	Phone : _____ Pin code _____
5. Father, Mother's/Parent's occupation ತಂದೆ/ತಾಯಿ/ಪೋಷಕರ ಉದ್ಯೋಗ	
6. Father's, Mother's/Parent's Educational level ತಂದೆ, ತಾಯಿಯರ/ಪೋಷಕರ ವಿದ್ಯಾಭ್ಯಾಸದ ಮಟ್ಟ	
7. Class & Medium in the Previous School ವಿದ್ಯಾರ್ಥಿ ಹಿಂದೆ ಓದಿದ ವರ್ಗ ಮತ್ತು ಮಾಧ್ಯಮ	
8. Now admit to which class ಪ್ರಸ್ತುತ ಯಾವ ತರಗತಿಗೆ ಸೇರಿಸಬೇಕು	
9. Mention the Students Specialties ವಿದ್ಯಾರ್ಥಿಯ ವಿಶೇಷತೆಗಳಿದ್ದಲ್ಲಿ ನಮೂದಿಸಿ	
10. Student Health condition ವಿದ್ಯಾರ್ಥಿಯ ಆರೋಗ್ಯದ ಗುಣಮಟ್ಟ	

The above Mentioned Particulars are True to the best of our Knowledge

Signature of the Student
ವಿದ್ಯಾರ್ಥಿಯ ಸಹಿ

Signature of the Parent/Guardian
ತಂದೆ/ತಾಯಿ/ಪೋಷಕರ ಸಹಿ

SPECIAL DIRECTION TO THE PARENTS

- 1) Frequent visit of parents is not entertained since a new student requires some time to adjust to the new environment.
- 2) Parents can meet the children on first Sunday of every month.
- 3) Parents can bring only Fruits and the like. We congratulate if it is available for all the students.
- 4) Parents are responsible to take their children home during Dasara and summer vacations.
- 5) Children will be sent to Ganesha Festival & Deepavali if the examination / test are not near.
- 6) Parents must bring back the children on specific date, otherwise would be fined rs.500/- per day.
- 7) It is better to inform us about child's misconduct / unhealthiness if any.
- 8) Letters will be dispatched every month on the progress of the student and also encourage students to write the same.
- 9) Unhealthy children will be treated at the expense of respective parents. Parents will be informed if the condition is serious.
- 10) At present there is no facility of staying / meals to parents. Please Co-operate with us.
- 11) The Institution is not responsible if the student escapes from the hostel.
- 12) Parents must not provide their children money or any valuable things.
- 13) The institution is not responsible if anything unfortunately happened to the student.
- 14) Parents should bear the loss if anything spoiled.
- 15) Parents can contact the officers in charge of the hostel through telephone if necessary.
- 16) Parents are requested to behave respectfully with the teacher.
- 17) The fees paid will not be returned if the student leaves hostel in the middle.
- 18) Hostel fees will be revised after the midterm vacation if inevitable.
- 19) All rights are reserved with the management committee to change the rules.
- 20) Parents are requested to participate in meetings conducted and to give their valuable suggestions.

Signature of the student

Signature of the Parent / Guardian

OFFICE USE

Name of the Student

Class Medium.....

Admission No Date.....

Remarks

Signature of the head of the institution



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The above Mentioned Particulars are True to the best of our Knowledge

Signature of the Student
ವಿದ್ಯಾರ್ಥಿಯ ಸಹಿ

Signature of the Parent/Guardian
ತಂದೆ/ತಾಯಿ/ಪೋಷಕರ ಸಹಿ

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Signature of the student

Signature of the Parent / Guardian

OFFICE USE

Name of the Student

Class Medium.....

Admission No Date.....

Remarks

Signature of the head of the institution