



LITTLE ACORNS PRE-SCHOOL

ADMISSION FORM

Please Affix
Child's
Photo here

(Please fill in CAPITAL LETTERS only)

A. FOR OFFICE USE ONLY

Date of Admission

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

 G.R. No.

--	--	--	--	--	--	--	--

Class Admitted to:

Nursery Junior KG Senior KG Senior Preparatory (Bal Vatika)

Preschool Code

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 Academic Year

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B. CHILD'S DETAILS

Child's Full Name _____
(as per Birth Certificate)

Date of Birth

D	D	M	M	Y	Y	Y	Y
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 Gender Male Female

Age (as on 31st March): _____ Years _____ Months

Religion _____ Caste / Category: General SC ST OBC Other

Child's Aadhaar Card Number

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C. RESIDENTIAL ADDRESS

Address _____

Street Name _____

Landmark _____ Town/City _____

State _____ Pincode

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J. DECLARATION BY PARENT / GUARDIAN

- I hereby declare that the information provided above is true and correct to the best of my knowledge.
- I agree to entrust my child to the care and supervision of the staff of Little Acorns Pre-School during school hours and authorized school activities.
- I understand that the school will take all reasonable care for the safety and well-being of my child; however, I agree not to hold the school responsible for any unavoidable accident or mishap that may occur despite reasonable precautions.
- I am fully aware that fees once paid are neither transferable nor refundable under any circumstances.
- I confirm that I have carefully read, understood, and agree to abide by the policies, rules, and regulations of Little Acorns Pre-School, as communicated by the school from time to time.

Date : _____

Signature of the Parent / Guardian

FOR OFFICE USE ONLY

Name of Student _____

Admission Confirm Date

D	D	M	M	Y	Y	Y	Y
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Class Admitted to Nursery Junior KG Senior KG Senior Preparatory (Bal Vatika)

Enrollment No.

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 Preschool Code

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UID Number

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Permanent Education Number (PEN)

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APAAR ID

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Remarks _____

Date : _____

Authorized Signature & Seal

LITTLE ACORNS PRE-SCHOOL

A Unit of Cambridge Education World, United Kingdom

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