





Cambridge Assessment
International Education

Cambridge International School

2019 - 20 APPLICATION FORM

Submissi	on of this applicat	ion does not	confirm the c	child's admission t	Legacy So	chool.	
ADMISSION DETAILS : Please	e indicate the level	and grade to	which you are	e seeking admissio	า		
Pre-Primary School (Montes:	sori)	MONT. 1 (Pr	re-Nursery)	MONT. 2 (Nur	sery)		
		MONT. 3 (LI	KG)	MONT. 4 (UK	à)		
Cambridge International Prin	mary	Grade 1	Grade 2	Grade 3	Grad	e 4	Grade 5
Cambridge Lower Secondary	у 🗆	Grade 6	Grade 7	Grade 8			
Cambridge Upper Secondary	y (IGCSE)	Grade 9					
Have you applied to Legacy	School previously	?	No	Yes _	C 'C A		
How did you hear about our Referal Web Search	Social Media	Newspa	iper Maga	azine Educatio	Specify Acad] Rankings
Whom were you referred by Legacy Parent/Teacher	by ?	Colleag	jue Ne	eighbour Fa	mily/Relati	ve Others	
Please specify their name ar	nd relationship wit	h you:					
Full name			Re	elationship			
Mobile No			Er	mail id			
Under which category are yo	ou seeking admiss	ion?					
Current Legacy Sibling	Vidyaniketan M	ontessori 🗌	Readmissic	on General	RTE	Other:	
STUDENT'S DETAILS							
Legal Name :	rst / Given Name		AC / // A/				
FII	rst / Given Name		Middle Name	?	Last / Fami	ıy ıvame	
Gender : Male Fe	male Birth Dat	t e :	m / vvvv	Age:	1st 2010	Blood Gro	up :
			****	Age:			
Biological Child Ac	dopted Child	Aadhar	Card No. :_				
Biological Child Ac Birth Certificate / Passpor	dopted Child	Aadhar 	Card No. : _ Issuing Auth	ority :			
Biological Child Ac	dopted Child	Aadhar 	Card No. : _ Issuing Auth	ority :		Place	
Biological Child Ac Birth Certificate / Passpor	dopted Child	Aadhar Ci	Card No. : _ Issuing Auth	ority :	Name and F	Place	
Biological Child Ac Birth Certificate / Passpor Caste: F	dopted Child Crit Number :Religion :Oth	Aadhar Ci Ci er Languag	Card No. : _ Issuing Auth itizenship : _ es known :	ority :	Name and F	Place	
Biological Child Ac Birth Certificate / Passpor Caste: F Native Language:	dopted Child Crit Number :Religion :Oth	Aadhar Ci Ci er Languag	Card No. : _ Issuing Auth itizenship : _ es known :	ority :	Name and F	Place	
Biological Child Ac Birth Certificate / Passpor Caste: F Native Language: City, State & Country of Birth	dopted Child Crt Number :Religion :Oth	Aadhar Ci Ci er Languag	Card No. : _ Issuing Auth itizenship : _ es known :	ority :	Name and F	Place	
Biological Child Ac Birth Certificate / Passpor Caste: F Native Language: City, State & Country of Birth	dopted Child Crt Number :Religion :Oth	Aadhar Ci Ci er Languag	Card No. : _ Issuing Auth itizenship : _ es known : d Name	ority :	Name and F	Place	
Biological Child Ac Birth Certificate / Passpor Caste : F Native Language : City, State & Country of Birth Address :	dopted Child Crt Number: Child Crt Number: Oth House / Apartn City	Aadhar Ci er Languag nent Number and	Card No. : _ Issuing Auth itizenship : _ es known : d Name	ority:	Name and Pl	Place lace Street Address Cou	ntry
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Biological Child Ac Birth Certificate / Passpor Caste : F Native Language : City, State & Country of Birth Address : Town / Area	dopted Child Crt Number: Oth Crty House / Apartn City SIZE COLOUR F	Aadhar Ci er Language ment Number and State / Pro	card No. : _ Issuing Auth itizenship : _ es known : d Name wince APHS (Take	Postal / n in the last mo	Name and Pl	Place Street Address Cou white back	ntry (ground)

HOUSEHOLD: Please list both parents below, even if one or more	is deceased or no longer has legal responsibilities towards the child.			
Parents' Marital Status (relative to each other): Married	Widowed Separated Divorced Unmarried			
With whom does the child make his / her permanent home?	Both Parents Parent 1 Parent 2 Legal Guardian			
Parent 1: Mother Father Guardian	Parent 2: Mother Father Guardian			
Is Parent 1 living? Yes No (Date deceased:)	Is Parent 2 living? Yes No (Date deceased:)			
Title (Mr. / Mrs.) First / Given Name Last / Family Name	Title (Mr. / Mrs.) First / Given Name Last / Family Name			
City & Country of Birth:	City & Country of Birth :			
Citizenship :	Citizenship :			
Personal Details	Personal Details			
Mobile Number :	Mobile Number :			
E-mail :	E-mail :			
Hobbies :	Hobbies :			
Sports :	Sports :			
Interests:	Interests :			
Professional Details (Attach Business Card)	Professional Details (Attach Business Card)			
Mobile Number :	Mobile Number :			
E-mail :	E-mail:			
Occupation :	Occupation :			
Employer:	Employer :			
Designation:	Designation :			
Annual Income (INR):	Annual Income (INR):			
Areas of expertise:	Areas of expertise:			
Are you on a transferable job posting?: \(\square\) Yes \(\square\) No	Are you on a transferable job posting ? : \(\square\) Yes \(\square\) No			
Are you a Government of India employee ? : Yes No	Are you a Government of India employee ? : 🔲 Yes 🔲 No			
If yes please specify:	If yes please specify :			
Educational Details (List the names of the institution)	Educational Details (List the names of the institution)			
Highest Qualification:Year:	Highest Qualification :Year :			
University:	University:			
City / State / Country :	City / State / Country :			
Master's Degree:Year:	Master's Degree :Year :			
College / University:	College / University:			
City / State / Country:	City / State / Country :			
Bachelor's Degree :Year :	Bachelor's Degree : Year :			
College / University:	College / University:			
City / State / Country :	City / State / Country :			
Sr. Secondary School:	Sr. Secondary School :			
Secondary School	Secondary School			

Title (Mr. / Mrs.) First / Given Name Last / Family Name Full Name Age Relationship Relationship to child: School Attended: _____ Home address **if different** from earlier address: College / University: Relationship Home / Office Number : _____ School Attended: _____ Mobile Phone: _____ College / University: E-mail: _____ **PREVIOUS SCHOOL DETAILS** Current or most recent school attended : __ Grade : _____ Entry Date : _____ Withdrawal Date : _____ Type : Delic School Derivate School Home Schooled Board Curriculum: IB Cambridge CBSE ICSE State Other Reason for withdrawal: ____ School Address: __ Area / Town City State / Province Country _____ E-mail : _____ Principal's Name : _____ _____ School Phone : ____ Extension: ___ List below any other school/s that your child has previously attended (if applicable): School - 1 School - 2 School - 3 School Name Location (City, State, Country) **Board / Curriculum** Grades enrolled in **Enrollment Date** Withdrawal Date Reason for withdrawal **ACTIVITIES** Please list the child's most important hobbies, extracurricular, cultural and volunteer activities in the order of their interest to the child. Include any specific major events and important accomplishments. Is this a summer activity or Time spent **Activity** Level Position held, Honours received part of a regular routine? per week

Applicant's Sibling/s:

Legal Guardian (Only other than a parent):



APPLICATION CHECKLIST		(For office use only)					
To be submitted when seeking admission:							
Application Form							
Health and Medical Questionnaire							
Important School Policies							
Additional Language Policy and Request For	m						
Support Services Questionnaire							
Application Fee (Rs. 3000/- DD drawn in favor	our of 'Legacy School')						
Applicant's Aadhar Card Copy							
Applicant's Passport Size Photographs (6 No	s on a white background.)						
Parents 1, 2 & Legal Guardian Govt. Issued Ph	oto ID Proof						
Parent 1, 2 & Legal Guardian Passport Size Ph	notographs (2 sets - white background)						
Proof of Date of Birth - Valid Passport and Bir	th Certificate*						
Last two (2) years' report cards or assessmen	t reports*						
2018-19 Half-yearly report card or assessmen	nt report*						
Letter of recommendation from the current s	chool						
Statement of purpose#							
#The statement of purpose is a detailed letter that is written by of the learning environment. Parent(s) must also indicate the ar- chaperone, with planning, etc.)	- ·	· · · · · · · · · · · · · · · · · · ·					
Only for Foreign Nationals							
Valid Passport*							
Dependent Visa or Residence Permit (PIO / 0	OCI)*						
Foreigners Regional Registration Office (FRR	D) Registration Form*						
Permanent address proof in home country*							
To be submitted prior to enrolling at Legacy Sch	nool:						
Original School Leaving / Transfer Certificate	from previous school						
Final report card or assessment report*							
'No Fees Due' letter from the previous school	l						
* Note : Please remember to bring all original docur		ssion confirmation.					
Signature Confirmation :							
We certify that all the information submitted in the	admission process is factually true and h	nonestly presented. We understand that our					
child may be subject to a range of possible disciplin	arv actions, includina admission revocati	on, should the information we have certified					
be false. This is to confirm that I have read, undersi	,	•					
policies and will abide by the school's policies at all times; I will also ensure that my child/ward abides by them as well.							
Name of Parent 1 :	Signature :	Date:					
Name of Parent 2 :	Signature :	Date:					