

APPLICATION FORM FOR ADMISSION

ACADEMIC SESSION 2026-27

METIABRUZ UNIT





🔾 +91 9831072483 | M Email: jibreelinternationalschool@gmail.com | @ Website: www.jibreelinternationalschool.com Affix a Affix a Affix a passport size passport size passport size photograph of photograph of photograph of the student father mother SECOND LANGUAGE: **CLASS APPLIED FOR: NEED SCHOOL TRANSPORT** YES NO | STUDENT'S DETAILS (IN BLOCK LETTER) STUDENT'S NAME: **DATE OF BIRTH: FEMALE GENDER: MALE** (Please put tick mark '√') PLACE OF BIRTH: **SOCIAL CATEGORY: GEN OBC** (Please put tick mark '√') **BLOOD GROUP: NATIONALITY: MOTHER TONGUE: MOBILE NO.: RELIGION: AADHAAR NO.:** LAST SCHOOL ATTENDED: **CLASS SESSION** DOES THE STUDENT HAVE ANY SIBLING IN THIS SCHOOL? YES NO (Please put tick mark '√') SIBLING'S DETAILS: (If your answer to the above question is YES) Class & Sec. (currently studying in) SI. No. Adm. No. Unit Name 1 2 3 **RESIDENTIAL ADDRESS: PERMANENT ADDRESS:**

PARENT'S DETAILS

MOTHER

FATHER

а	Name										
b Qualification											
С	c Occupation / Profession										
d	Organisation / Employer										
e Official Address											
f	Mobile No.										
g	Email ID.										
h	h Annual Income										
GUARDIAN'S DETAILS											
Guardian's Name:											
Relation with Student:				Qualification:							
Occupation / Profession:				Organisation / Employer:							
Address:											
Mobile No.:				Email ID.:							
MEDICAL DETAILS: (If your answer to the above question is YES) Allergies:							(Please put tick mark '√')				
Regular Medication: Doctor's Contact:											
Emergency Contact:											
DECLARATION BY THE PARENTS/GUARDIAN I/We hereby declare that the information provided above is true and correct to the best of my/our knowledge. I/We understand that any false or misleading information may lead to cancellation of my/our ward's admission. I/We further understand that submission of this application does not guarantee admission. I/We agree to abide by all rules and regulations of Jibreel International School, as may be amended from time to time.											
D	oate Fathe	er's Signature	N	лоther's Signatur	re		Guardian's Signature				
DOCUMENTS TO BE SUBMITTED ALONG WITH THIS APPLICATION FORM											
Two passport size student's and parent's photograph Photocopy of Birth Certificate Photocopy of Aadhaar Card Photocopy of the Report Card of the previous school Note: Please carry original documents for verification. Photocopy Photocopy Photocopy of the Report Card of the previous school FOR OFFICE USE ONLY											
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Admission Status

Class Allotted

Remarks

Registration No.

Date

Receipt No.