

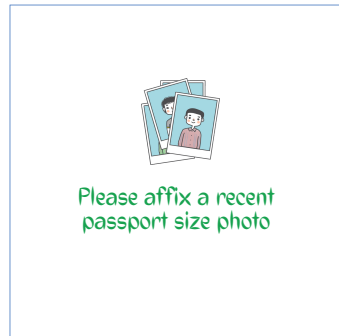


# ADMISSION FORM 2024-25

'The joy of schooling'

## High-Fliers

Foundational School  
Perambra Po, Kozhikode  
Ph: 9895856859



Admission seeking to:

Fly 1  Fly 2  Fly 3

To be filled in by the parent  
(Please use CAPITAL LETTERS to complete the form)



### Student's Personal Details

Student's Name(As in Birth Certificate) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender : Male  Female

Place of birth \_\_\_\_\_ Nationality \_\_\_\_\_

Adhaar No. \_\_\_\_\_ Religion \_\_\_\_\_ Caste \_\_\_\_\_



### Residence & Family Information

Address: \_\_\_\_\_ (House Name)

Post \_\_\_\_\_ Village \_\_\_\_\_ District \_\_\_\_\_

State \_\_\_\_\_ Pin Code: \_\_\_\_\_ Bus point \_\_\_\_\_



### Father

Full Name: \_\_\_\_\_ Mobile No \_\_\_\_\_

Educational Qualifications \_\_\_\_\_

Profession \_\_\_\_\_ Designation \_\_\_\_\_

E-Mail \_\_\_\_\_ WhatsApp No \_\_\_\_\_



### Mother

Full Name: \_\_\_\_\_ Mobile No \_\_\_\_\_

Educational Qualifications \_\_\_\_\_

Profession \_\_\_\_\_ Designation \_\_\_\_\_

E-Mail \_\_\_\_\_ WhatsApp No \_\_\_\_\_



### Guardian

Full Name: \_\_\_\_\_ Mobile No \_\_\_\_\_

Relationship with the student \_\_\_\_\_



### Declaration by Parent

I Mr/Ms \_\_\_\_\_ father/mother/guardian of \_\_\_\_\_  
seeking admission to grade \_\_\_\_\_ declare that the above given details are true and correct.

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Signature \_\_\_\_\_

Office Use Only



\_\_\_\_\_ is admitted to Class \_\_\_\_\_ for the  
academic year 2024-25 with admission number \_\_\_\_\_

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of the Principal \_\_\_\_\_