



ATTACH  
STUDENT'S  
PHOTOGRAPH  
HERE

The Principal,  
PINEWOODS INTERNATIONAL HIGH SCHOOL & JUNIOR COLLEGE  
PANCHGANI 412 805.  
Maharashtra, INDIA.  
Phone: 02168 – 240900, 240901, 240902.

Dear Sir / Madam,

I / We desire that my / our \_\_\_\_\_ may be admitted to the **JUNIOR COLLEGE DIVISION (Std. \_\_\_\_\_)**  
**(STREAM).**

OF PINEWOODS INTERNATIONAL HIGH SCHOOL & JUNIOR COLLEGE, PANCHGANI.

**I / We have carefully read the Prospectus & Website containing the Rules and Regulations, Terms and Conditions and Requirements of the Institution and I / we hereby agree to abide by them.**

I / We also agree to the all the Rules and Regulations, Terms and Conditions and Requirements of the Institution mentioned in the Prospectus & Website.

I / We undertake to pay the Fees on admission. After admission if my son / daughter is unable to adjust to the institution, the **FEES IS NOT REFUNDABLE** under any circumstances. Full Term fee is charged, irrespective of the fact when the pupil joins the institution.

**FEES ARE NOT REFUNDED IF THE CHILD IS WITHDRAWN IN THE MIDDLE OF THE ACADEMIC YEAR.**

I am aware that in case my son/ward is not joining in the new academic year, notice of withdrawal is to be submitted to the Principal by 15th January. In case notice is not given by 15th January, parents will pay Rs.50,000/- in lieu of notice I am also aware that there is a fine of Rs.100/- per day on fees not being paid on time.

**All legal matters concerning students and student-related cases are subject to Wai jurisdiction.**

Particulars of the candidate to be filled in BLOCK LETTERS ONLY.

Name in Full - (In Block Letters)	Surname:	Child's Name:	Father's Name:
Date of Birth - Attach Xerox Copy of Birth Certificate	In figures:	In words:	
Place of Birth:	District & State:		

Dormitory NORMAL/SPECIAL \_\_\_\_\_

Nationality \_\_\_\_\_ Passport No. \_\_\_\_\_

Religion \_\_\_\_\_ Mother Tongue \_\_\_\_\_

Seeking admission in STD \_\_\_\_ of the SCHOOL DIVISION

Name of the passing out School and Board \_\_\_\_\_

Full address of the passing out school \_\_\_\_\_

Medium of Instruction \_\_\_\_\_

Standard Completed \_\_\_\_\_ Year \_\_\_\_\_

Name of Parent/Legal Guardian \_\_\_\_\_

Yearly Income \_\_\_\_\_ Occupation \_\_\_\_\_

I have read the Prospectus and agree to abide by the all the rule in all respect, and also accept that they may be changed from time to time without notice.

Date \_\_\_\_\_

Signature of Father/ Mother/ Legal Guardian

**IMPORTANT:**

**ON CONFIRMATION OF ADMISSION PLEASE PROVIDE THE FOLLOWING:**

1) MARK SHEET OF ANNUAL EXAMINATIONS

2) ORIGINAL COPY OF THE LEAVING CERTIFICATE FROM THE SCHOOL. **(THE CERTIFICATE SHOULD BE ATTESTED BY THE EDUCATION OFFICER.)**

FOR OFFICE USE ONLY:

Admission test conducted on

Admission Granted in Grade

Academic Year

Papers Submitted

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

**PINEWOODS INTERNATIONAL HIGH SCHOOL & JUNIOR COLLEGE, PANCHGANI.**  
**(All Details to be filled in Complete)**

**FILL IN THE FOLLOWING FORM IN CAPITAL LETTERS.**

NAME OF STUDENT: \_\_\_\_\_

FATHER'S FIRST NAME: \_\_\_\_\_

FATHER'S MIDDLE NAME: \_\_\_\_\_

FATHER'S LAST NAME: \_\_\_\_\_

MOTHER'S FIRST NAME: \_\_\_\_\_

MOTHER'S MIDDLE NAME: \_\_\_\_\_

FULL RESIDENCE ADDRESS WITH PINCODE:  
\_\_\_\_\_  
\_\_\_\_\_

PHONE NO. OF RESIDENCE: \_\_\_\_\_

MOBILE NO. OF FATHER \_\_\_\_\_

EMAIL ID OF FATHER \_\_\_\_\_

MOBILE NO. OF MOTHER \_\_\_\_\_

EMAIL ID OF MOTHER \_\_\_\_\_

FULL OFFICE ADDRESS WITH PINCODE:  
\_\_\_\_\_  
\_\_\_\_\_

PHONE NO. / FAX NO. OF OFFICE: \_\_\_\_\_

PERMANENT ADDRESS:  
\_\_\_\_\_  
\_\_\_\_\_

NAME OF RELATIVE & FULL ADDRESS WITH PINCODE:  
\_\_\_\_\_  
\_\_\_\_\_

RELATIVES' PHONE NO.: \_\_\_\_\_

RELATIVES' MOBILE NO.: \_\_\_\_\_

RELATIVES' E-MAIL ID \_\_\_\_\_

Signature of: \_\_\_\_\_

**Father**

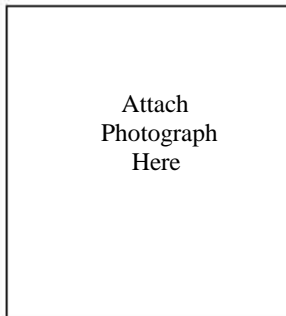
\_\_\_\_\_

**Mother**

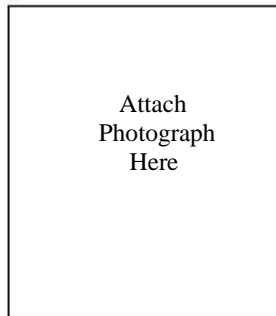
\_\_\_\_\_

**Legal Guardian**

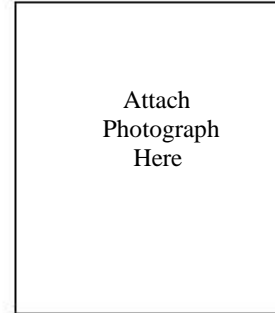
**PINEWOODS INTERNATIONAL HIGH SCHOOL & JUNIOR COLLEGE**  
**PANCHGANI 421 805, Maharashtra, INDIA.**  
**FORM B**



**MOTHER**



**FATHER**



**GUARDIAN**

Declaration to be signed by Parent / Guardian at the time of admission.

1) I \_\_\_\_\_ (Full Name of Parent) Parent /guardian of \_\_\_\_\_ (full Name of Student) have carefully, read the

**PINEWOODS**

**INTERNATIONAL HIGH SCHOOL & JUNIOR COLLEGE'S** prospectus and I accept the terms. Conditions, principles and procedures on which the institution functions and agree to abide by all the rules and regulations (or any substitutions for or modifications in them, which may be made by the school authorities from time to time). I shall particularly carry out the rules and procedure regarding the payment of the fees and other dues, fully accept the Principal's absolute discretion and decision in the matter of discipline, promotion and admission of students. . I agree to pay for any damage caused by my child/ward to the movable and immovable property of the institution.

2) Fully realizing that in the course of normal life and the many-sided and strenuous training given in the institution particularly in physical activities and excursions and trips, accident are likely to occur, resulting sometimes in serious damage to life and limb, I hereby absolve the institution of all reasonability in case such accident or accidents befall on my son / daughter / ward in this institution after making sure of its capability in taking normal precautions.

3) **Fees and other charges are liable to be revised at any time. Full Term fee is charged, irrespective of the fact when the pupil joins the institution. I specifically accept the conditions that the name of my son / daughter / ward is liable to be removed from the roll and the student to be sent home if the payment of fees falls in arrears for more than two months from the date of bill. I also agree to the term of fine of Rs.100/- per day in case I do not pay the fees within stipulated period. also agree that my child will not be permitted to appear in the examinations if dues are not cleared**

4) I accept the Principal's absolute discretion in the regard to who is to be allowed to meet my son / daughter/ward during term time, where he / she is to be allowed to go or visit whilst he / she is at institution and what personal expenditure he / she is to be allowed. I agree that the institution may give or get for my son / daughter / ward any article urgently required by him/her and that bill for such articles will be sent to me.

5) I understand that the school maintains the right to remove / rusticate a student at any time and without reconsideration or appeal for low academic achievement or if the student fails to conform to the standards or discipline set by the institution.

6) With regard to complaints of any kind, if any, I shall meet the School Authorities in the Office only and not the Class Teacher or any other Teacher/Warden.

7) I have read the prospectus / visited the website, read all the rules and I am bound by all the rules of the institution and will abide by them. **I will be responsible if my child/ward brings things that are not permitted to the school.**

8) I am fully aware that boys / girls are not admitted on trial and that fees once paid will not be refunded. **FEES ARE NOT REFUNDED IF THE CHILD IS WITHDRAWN IN THE MIDDLE OF THE ACADEMIC YEAR. I am aware that in case my son/ward is not joining in the new academic year, notice of withdrawal is to be submitted to the school by 15th. January. If the notice of withdrawal is not submitted after as per the rule to the school then a notice fee of Rs. 50,000 will be charged.**

9) All legal matters concerning students and student-related cases are subject to Wai jurisdiction.

Date \_\_\_\_\_

\_\_\_\_\_  
**Mother**

**4**

\_\_\_\_\_  
**Father**

\_\_\_\_\_  
**Legal Guardian**

**PINEWOODS INTERNATIONAL HIGH SCHOOL & JUNIOR COLLEGE  
PANCHGANI 412 805, Maharashtra, INDIA.**

**FORM C**

**Certificate of General Health**

**(To be filled in and signed by the Medical Officer)**

A. This is to certify that I have examined today Master / Miss \_\_\_\_\_  
aged \_\_\_\_\_ and I  
Find that he/she is not suffering from any infectious or contagious disease and that he/she is physically  
fit in all respects to attend the boarding and to take part in all its activities.

1. (a) Height \_\_\_\_\_ (b) Weight \_\_\_\_\_ (c) Chest \_\_\_\_\_

2. Identification Marks (i) \_\_\_\_\_ (ii) \_\_\_\_\_

3. (a) **Measles-Rubella (MR) Vaccine taken on :** \_\_\_\_\_ **(Attach Certificate)**

(b) **NASOVAC-S Influenza Vaccine taken on:** \_\_\_\_\_ **(Attach Certificate)**

4. Record after each disease given below with (+) for positive and (-) for negative, Depending  
whether the boy/girl has suffered from it or not :

I) Rheumatic fever	<input type="checkbox"/>	II) Malaria	<input type="checkbox"/>
III) Typhoid	<input type="checkbox"/>	IV) Enuresis	<input type="checkbox"/>
V) Measles	<input type="checkbox"/>	VI) Nephritis	<input type="checkbox"/>
VII) Diphtheria	<input type="checkbox"/>	VIII) Mental retardation	<input type="checkbox"/>
IX) Worms	<input type="checkbox"/>	X) Poliomyelitis	<input type="checkbox"/>
XI) Asthma	<input type="checkbox"/>	XII) Dysentery	<input type="checkbox"/>

5. Other Information:

- i) Eyes: Refractive Error / Trachoma
- ii) Ears: Any discharge / disease / deafness
- iii) Nose: Epitasis – D.V.S.
- iv) Tonsils: Chronic Enlargement
- v) G.I.T. – Appendicle Colic/Any other colic
- vi) Hernia / Hydrocephalus
- vii) Phimosi

6. Any injury, illness or operation during the last two years? Date? \_\_\_\_\_

7. Allergy to drugs: Penicillin, Sulfa group, Quinine, Chloramphenicol and any other drug.

8. **Blood group** \_\_\_\_\_

9. **Report of G6PD Blood Test & CBC (Complete Blood Count) to be enclosed.**

Name of the Doctor \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

**Signature / Seal of the Doctor**  
**Date:**

**PINEWOODS INTERNATIONAL HIGH SCHOOL & JUNIOR COLLEGE, PANCHGANI.**

**Certificate of General Health**

A. This is to certify that I have examined Master / Miss \_\_\_\_\_

\_\_\_\_\_ aged

\_\_\_\_\_ and I find that he / she is not suffering from any infectious or contagious disease and that he / she is physically fit in all respect to attend a boarding institution and to take part in all its activities.

B. The following vaccinations / inoculations are **COMPULSARY**:

**Disease**

**Date of Inoculation (Attach Certificate)**

a) Measles-Rubella (MR)

b) Typhoid

c) NASOVAC-S Influenza

d) Hepatitis B

**Signature / Seal of Doctor**

**Date:**

**FOR FOREIGN STUDENTS ONLY**  
**PINEWOODS INTERNATIONAL HIGH SCHOOL & JUNIOR COLLEGE, PANCHGANI.**

Name in Capital (As it appears in the PASSPORT)

\_\_\_\_\_

Present Nationality \_\_\_\_\_

PASSPORT PARTICULARS

VISA PARTICULARS

No. \_\_\_\_\_

1. No. \_\_\_\_\_

Issued at \_\_\_\_\_

2. Issued at \_\_\_\_\_

Issued on \_\_\_\_\_

3. Issued on \_\_\_\_\_

Valid till \_\_\_\_\_

4. Visa for India  
Valid till \_\_\_\_\_

Date and Place of arrival in India \_\_\_\_\_

Name of Vessel / Airline on which \_\_\_\_\_  
arrived in India.

Address of last residence outside India \_\_\_\_\_

\_\_\_\_\_

**PLEASE NOTE ADMISSION WILL BE GRANTED ONLY ON STUDENT'S VISA.**

**NAME AND DETAILS OF GUARDIAN IN INDIA:**

Full Name \_\_\_\_\_

Occupation \_\_\_\_\_

Residential Address \_\_\_\_\_

Phone No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

E-Mail ID \_\_\_\_\_

Office Address \_\_\_\_\_

\_\_\_\_\_

Office Phone No. \_\_\_\_\_ Office E-Mail ID \_\_\_\_\_

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

\_\_\_\_\_ **MOTHER**

\_\_\_\_\_ **FATHER**

\_\_\_\_\_ **GUARDIAN**