



FAITH GLOBAL EDUCATIONAL ACADEMY

Admin office - 32 MAHENDRA ROY LANE, KOLKATA -700046
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GLOBAL EDUCATION STANDARDS WHICH PRIORITISE STUDENTS' FUTURE

Please Stick your
 Child's recent
 Passport Size
 Photograph

APPLICATION FOR ADMISSION TO KINGDOM TOTS

NOTE TO PARENTS/GUARDIANS
 where not applicable, kindly write
 N/A or DOES NOT ARISE

ALL ENTRIES IN UPPER CASE ONLY

Form No :

A. PARTICULARS OF CHILD

1. Name (BLOCK LETTERS)		(FIRST NAME)	(MIDDLE NAME)	(LASTNAME)
2. Date of Birth <i>N.B.</i> (No subsequent alteration of this date will be allowed under any circumstances)		DD / MM / YYYY		3. Gender :
4. a. Place of Birth		a.		
b. Documents produced		b. (1) Birth Certificate (2) Hospital Discharge Certificate (3) Corpn. Certificate		
5. If Christian, date when dedicated? (Copy of certificate to be attached)				
6. Has the child attended Play School anywhere? (Yes / No)				
7. If yes, give :-		a.		
a. The name of the play school		b.		
b. The date he or she left the previous school				

B. PARTICULARS OF PARENTS OR GUARDIAN

8. Father's name (in full)		
9. Address (in full) and phone number		
10. Father's a. Nationality	a.	
b. Religion	b.	
11. Do you belong to a Scheduled Caste/Tribe? (If Yes, please write Caste/Tribe in the space above and attach copies of documentary evidence)		

- 12. If the Father is Working, state**
- a. Occupation**
 - b. If Service, Govt. / Private**
 - c. Organisation / Company Name**
 - d. Designation**
 - e. Monthly Salary**
(ATTACH RECENT PAY SLIP)
 - f. Years of Service / Business**

- a. Service Business Self-Employed
- b.
- c.
- d.
- e.
- f.

13. Is the Father in receipt of any pension or income from other sources. If Yes, mention the details

- 14. If the father is unemployed, state:**
- a. Date of last employment**
 - b. Where employed**
 - c. Monthly salary**
 - d. Reason for leaving**

- a.
- b.
- c.
- d.

15. If the father is dead, state the date of demise

16. Mother's Name (in full)

- 17. Mother's**
- a. Nationality**
 - b. Religion**

- a.
- b.

18. If Mother is working, state:

- a. Occupation**
- b. If Service, Govt. / Private**
- c. Organisation / Company Name**
- d. Designation**
- e. Monthly Salary**
(ATTACH RECENT PAY SLIP)
- f. Years of Service / Business**

- a. Service Business Self-Employed
- b.
- c.
- d.
- e.
- f.

19. Total Number of children in the family

a. Attending School

a.

b. Not attending school

b.

20. Particulars of children attending School

NAME	AGE	SCHOOL	FEES YOU PAY
1.			
2.			
3.			

21. Particulars of children not attending School

NAME	AGE	OCCUPATION (if any)	SALARY (if any)
1.			
2.			
3.			

22. If the father and Mother are deceased give :

a. Name of the Guardian

a.

b. Address of Guardian

b.

c. Occupation of Guardian

c.

d. Monthly salary

(ATTACH RECENT PAY SLIP)

d.

C. ADD-ON FACILITIES

Please indicate if your child requires any of the following services with a YES / NO

YES

NO

1. Does your child require add-on facilities apart from Play School?		
2. Does your child require Creche (daycare) facility?		
3. If YES, specify the number of hours needed?		
4. Does your child require food prescribed by a Dietitian?		
5. If Yes, <input type="checkbox"/> 8AM-Breakfast <input type="checkbox"/> 11AM-Snacks <input type="checkbox"/> 1PM-Lunch <input type="checkbox"/> 3PM-Snacks		
6. Does your child require medical checkup?		
7. If Yes, <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half-Yearly <input type="checkbox"/> Annually		
8. Does your child require tutoring / coaching services? <small>(If yes, fill additional Faith Global Coaching Center admission form)</small>		
9. Does your child require music / vocal lessons? <small>(If yes, fill additional Faith School of Music admission form)</small>		
10. Does your child require dance training classes? <small>(If yes, fill additional Faith School of Dance admission form)</small>		
11. Does your child require arts & crafts training classes? <small>(If yes, fill additional Faith School of Arts & Crafts admission form)</small>		
12. Does your child require professional counseling services? <small>(If yes, fill additional Faith Counselling & Psychological Healing Center admission form)</small>		
13. <input type="checkbox"/> Weekly once <input type="checkbox"/> Weekly Twice <input type="checkbox"/> Weekly thrice		
14. Does your child require moral lessons? <small>(If yes, fill additional Children's Club form) This service will be Provided FREE OF COST</small>		
15. Does your child require transportation services?		

23. Medical History

a. Major surgery undergone

b. Physical ailments the teacher should know about

c. Physical handicap if any

d. Person to be contacted if any emergency arises

Address

Phone No Mobile No

e. Family Doctor Address

Phone No Residential Chamber

DECLARATION OF PARENTS OR GUARDIAN

I so certify that, to the best of my abilities, I have accurately completed the above-mentioned information, and if (Child name)..... is chosen, I will abide by all school rules.

I affirm that all of the data presented above is accurate.

I consent to pay fees in accordance with the guidelines set forth by the school authorities and to any subsequent charge increases that the school may occasionally notify me of. In the event that admission is approved and I later remove my child, I consent to forfeiting the money I paid.

I am aware that Christian teaching will serve as the school's guiding philosophy, and I have no issues with that. I have no problem with my child attending the regular school chapel services.

Name of Father : Signature

Name of Mother : Signature

Date: Name of Guardian : Signature

(If no Father/Mother then ONLY)

The following must be submitted along with this form

- | | | |
|-------------------------------------|--|---------------------------------|
| 1. Two Passport size Photographs | 2. Copy of Birth Certificate | 3. Copy of Aadhar Card of Child |
| 4. Father / Mother Aadhar Card Copy | 5. Child's Dedication Certificate copy | 6. Pay Slip of Father / Mother |

(If any dedication is done then ONLY)

Application Form Fee - Rs. 500/-

(NON-REFUNDABLE)

BANK DETAILS

FAITH GLOBAL EDUCATIONAL ACADEMY
ACCOUNT NUMBER: 924010013919991
IFSC CODE: UTIB0002759
AXIS BANK LTD.



SCAN THIS QR CODE FOR PAYMENT OF
ADMISSION & TUITION FEES

ADDRESS FOR COMMUNICATION

FAITH GLOBAL EDUCATIONAL ACADEMY
32 MAHENDRA ROY LANE
BESIDE RS MARUTI SUZUKI SERVICE CENTER
KOLKATA - 700046

EMAIL: faithglobalacademy@gmail.com
HELPLINE NO: 9051520146 | 9062000146

OFFICE PURPOSE ONLY

DATE OF SCREENING: **DATE OF INTERVIEW:**

ADMISSION GRANTED FOR PLAY SCHOOL: **LEVEL**

REMARKS (IF ANY)

APPLICATION STATUS: ACCEPTED REJECTED REQ. MORE INFO. PENDING

ADMISSION FEE:

MONTHLY PLAYSCHOOL FEE:

ADD-ONS MONTHLY FEE:

TOTAL:

DD / MM / YYYY

SIGNATURE
PRINCIPAL

SIGNATURE
CHAIRMAN/EXECUTIVE DIRECTOR

DATE