



G. Rio School

ADMISSION FORM XI

DAY SCHOLAR / BOARDER



Sl. No.

Reg. No.

CBSE Affiliation No.: 1430016 School Code: 35339

High School Area, P.O Box: 702

Kohima, Nagaland – 797001

Email Id: grioschool@yahoo.in Tel Ph: 8837455637

Note:

1. The form must be filled in BLOCK LETTERS.
2. The medical report of the student should be enclosed with this form.

Please **PASTE**
recent passport
size photo.

(Do Not Staple)

Sex: (☐ Male / ☐ Female)

Stream in which admission is sought (Arts / Science) session 20__ to ____

(NOTE: MANDATORY INTEGRATED NEET/JEE COACHING CLASSES FOR SCIENCE STREAM. An additional fee will apply)

A. Particulars:

Name of the child (In Capital letters): _____

Date of Birth: _____ Religion: _____ Tribe/Community: _____ Category: (ST/SC/OBC/GEN)

Present Address: _____

Aadhar No. _____ Mobile No. (Parents WhatsApp): _____

PEN NO.: _____ APAAR ID : _____

B. Particulars of Parents:

Father

Mother

1. Name: _____

2. Age: _____

3. Educational Qualification _____

4. Occupation/Designation _____

5. Dept./Address: _____

6. Mobile No. (WhatsApp) _____

7. Email id _____

Remarks of the Principal/Director

Signature of the Parent with Date

Note: Provide valid WhatsApp Mobile Number for information.

Signature: _____

C. Previous School History:

(Include home schooling details)

SCHOOL ATTENDED	YEARS	LEVEL/CLASS	BOARD

D. Details of siblings (If Studying in G. Rio School) :

NAME	DATE OF BIRTH	SEX (M/F)	CLASS

E. Subjects offered:

Class – XI (Arts)

1. English
2. History
3. Political Science
4. Sociology/Economics
5. Mathematics/Geography/Business Studies
6. Physical Education/Tourism/Painting

Subjects of Internal Assessment

7. Fine Art/Music
8. General Studies
9. Health & Physical Education (HPE)
10. Work Education

Class – XI (Science)

1. English
2. Chemistry
3. Physics
4. Biology/Comp. Science
5. Mathematics/Geography/Business Studies
6. Physical Education/Tourism/Painting

Subjects of Internal Assessment

7. Fine Art/Music
8. General Studies
9. Health & Physical Education (HPE)
10. Work Education

NOTE:

1. All students must indicate their choice of optional subjects by clearly underlining the subject.
2. It is MANDATORY for all Science stream applicants to take up integrated Coaching classes for NEET/JEE. An additional fee will apply.

F.

Local Guardian:

(Must be filled if parent is not residing in Kohima)

Name

Address

.....

Phone number:

Language spoken at Home:

Will your child be able to adapt to a variety of food? (YES / NO)

If No, explain:

DECLARATION OF PARENT

I declare that all information provided regarding my child/ward is accurate and true. I understand that if any information is found to be false or misleading, I am liable to forfeit the seat allotted to my ward and the fees paid, as per the school's norms.

I agree to comply with all rules and regulations of the school and will ensure that my ward also abides by them.

I have enclosed a non-refundable application fee of Rs 1000/- and a copy of the student's latest school report and medical report.

Name:

Signature with Date:

FOR OFFICE USE ONLY

Admitted: (YES / NO)

HOD's Remarks:

HOD: To sign once the student's place has been confirmed:

Signed:

Date:



G. Rio School, Kohima

High School Area, P.O Box – 702, Kohima – 797001 Nagaland
(CBSE Affiliation No.1430016 : School Code 35339)

www.grioschool.com : E – Mail: grioschool@yahoo.in : Phone No.: 03702806075



G.

MEDICAL FORM

Name: _____

Class: _____ Age: _____ Sex: (Male / Female)

1. Blood Group : _____

2. Immunization Status (Fully Immunized or not) : _____

3. Heart Diseases : _____

4. Congenital Disorders : _____

5. Respiratory Problems : _____

6. Allergies : _____

7. Vision : _____

8. Hearing : _____

9. Height : _____

10. Weight : _____

11. Infectious Diseases: -

(a) HIV : _____

(b) HEPATITIS 'B & C':

(Whether vaccinated) for HEPATITIS-B

Yes / No

12. Any other: _____

For Doctor's use only

This is to affirm that I have thoroughly examined _____
son/daughter _____ and hereby certify that He/ She is not
suffering from any Chronic or Communicable diseases. He/ She has not being exposed to any infectious or contagious
diseases, in the last 30 days.

He/she is medically and clinically fit to pursue His/ Her Schooling Activities.

Further remark of the Doctor (if any) _____

Date: _____

Doctor's Name & Signature

Regd. No with Seal:

H. Enclosures: For Parents Use (NOT TO BE SUBMITTED)

1. At the time of SUBMISSION of APPLICATION FORM:

The following documents should be submitted along with the **APPLICATION FORM**:

- a) End-Term Marksheet of Class 9.
- b) Mid-Term Marksheet of Class 10.
- c) Admit Card of Class – 10 Board Examination.
- d) Birth Certificate (**Photocopy**)
- e) Aadhar

Foreign Students who have passed X Grade from other Examination Bodies:

- a) Documents as stated above.

2. Percentile Cut-off requirements:

- a) Science Stream: 60% in Mathematics & Science.
- b) Arts Stream: 60% in English & Social Science.

3. Documents to be produced at the time of ADMISSION (For Selected Candidates):

- a) Final Board Marksheet in **Photocopy**.
- b) Transfer Certificate/School Leaving Certificate in **ORIGINAL**.
- c) **PCR** (For students coming from NBSE Board)

NOTE:

- 1. Staple all documents to the top left-hand corner of the application.
- 2. PARENT should accompany the child during the time of Interview.