



# LANCE FORT INTERNATIONAL SCHOOL

## THE TEMPLE OF WISDOM

### ADMISSION PROCEDURE AND GUIDELINES

All parents know that the educational decisions they make today for their young children will have a profound impact on their future success. The problem arises in selecting the right school for their child's early years. Which educational philosophy is best? What facilities does the school offer? The list of questions can seem endless.

Lance Fort International School welcomes students to an enriching and enjoyable learning experience. The Admission Procedure at LFIS is completely transparent. It has been designed to ensure a suitable fit between what the parents and children expect from the school and what the school in turn can offer them.

**The Admission Process is categorized into 3 stages. Please read the following guidelines carefully before filling out the Application Form. The forms should be filled out in BLOCK LETTERS in blue/black ink.**

#### I. APPLICATION FORM

- Parents/guardians can obtain the Application Form in the following ways.
  - Collect from the School Campus – Lance Fort International School, Opposite Sunil Colony, Burari, Delhi-110084 on payment of fees of Rs. 400/- in cash. Please retain receipt for future reference
  - Download from the School Website – [www.lancefortinternationalschool.com](http://www.lancefortinternationalschool.com) (The fee of Rs. 400/- will need to be paid along with the Registration Fee at the School campus at the time of submission of the Application Form)
- Admission will be granted to candidates only if they fulfill the age criteria mentioned below.

Grade	Nur	KG	1	2	3	4	5	6	7	8
Age	3+	4+	5+	6+	7+	8+	9+	10+	11+	12+

- The Application Form and additional admission documents should be understood and signed by the legal custodian of the student (Father/Mother/Guardian).
- Incomplete Application Form and submission of false information will be treated as invalid and will lead to the cancellation of application as well as admission of the child.



## II. REGISTRATION & INTERCATION

5. Completed Application Form along with supporting document should be submitted in person at the School campus between 9:00 AM - 2:00 PM on all working days.
6. The following is the list of documents /material to be submitted:
  - Duly filled Application Form
  - Copy of Authentic Certificate showing Date of Birth of child
  - Two passport size photographs each of mother & father
  - Ten passport size photographs of each child
7. The following is the list of documents/material to be submitted after admission has been granted:
  - Photocopy of original marksheet of last examination passed (Grade 3 & above)
  - Photocopy of residential address proof of father & mother or of legal guardian with whom the student is residing.
  - Photocopy of PAN Card/Voter's Card/Ration Card/Passport of father & mother or legal guardian
  - Students to be promoted to the subsequent class are eligible for admission on submission of School Leaving Certificate/Transfer Certificate (TC) duly countersigned by the appropriate authority and the marksheet of the previous class. TC, if not submitted at the time of admission, is to be submitted with in 60 days of commencement of the academic session, failing which the student is liable for cancellation of admission and withdrawal.
8. A registration fee of Rs.25/- needs to be deposited along with the Application Form. If the Application Form has been downloaded from the website, then an additional of Rs.400/- needs to be paid.
9. The Admit Slip/Card will be issued to the student if all documents are in order, stating the date and time for further interaction. The dates can change with prior notice. Students will be expected to carry the Admit Slip/Card along for all future interactions. Parents/Guardians of all candidates are required to accompany the child at the time of interaction.
10. The admission list will be put up on the Notice Board at the school campus. Parents/Guardians will be informed of the relevant notification date on the day of interaction.
11. The School Managemnt is the final authority regarding the confirmation of Admission.

## II. COMPLETION OF ADMISSION

12. On confirmation of admission, instructions on the method of paying the Admssion Fee & Security Deposit will be shared with the parents/legal guardian.
13. Parents are humbly requested to use LFIS mobile app available on the both android & ios devices or using Parent Login on school webiste: [www.lanceforinternationalschool.com](http://www.lanceforinternationalschool.com) to deposit fees.
14. No fee, once deposited, will be refunded except for the Security deposit, regardless of whether the student has attended classes or not from the beginning of the session.
15. Payment of Admission Fee and Security Deposit must be completed with in 10 days of the admission of the admission being granted, or else admission may stand cancelled.
16. Details regarding school unifrom, transport, books, stationery and other requirements will be shared with the parents/legal guardian at the time of completion of the Admission Process.



Application Form Number.....

# Lance Fort International School

## APPLICATION FORM

### School Campus

Opposite Sunil Colony,  
Burari Village, Delhi-110084  
Delhi, India

### Contact Information

**W:** www.lancefortinternationalschool.com  
**E:** info@lancefortinternationalschool.com  
**M:** +91 7303799381-83

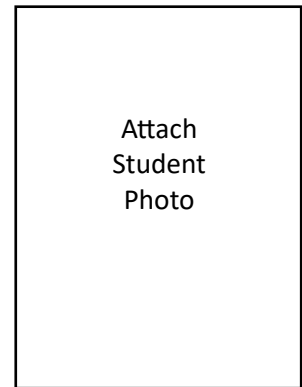
Please fill in the following information in **BLOCK LETTERS** in blue/black ink

### I. GENERAL INFORMATION

Date of submission \_\_\_ / \_\_\_ / \_\_\_ for Academic Year \_\_\_\_\_

Admission required for (please tick relevant grade)

- |                                  |                            |                            |                            |
|----------------------------------|----------------------------|----------------------------|----------------------------|
| <input type="checkbox"/> Nursery | <input type="checkbox"/> 2 | <input type="checkbox"/> 5 | <input type="checkbox"/> 8 |
| <input type="checkbox"/> KG      | <input type="checkbox"/> 3 | <input type="checkbox"/> 6 |                            |
| <input type="checkbox"/> 1       | <input type="checkbox"/> 4 | <input type="checkbox"/> 7 |                            |



### II. STUDENT INFORMATION

First Name  Middle Name

Last Name

Gender  Male  Female

Date of Birth \_\_\_ / \_\_\_ / \_\_\_ (DD/MM/YYYY) Age as on 31/03/20\_\_ :  Y e a r s

Nationality  Religion

Mother Tongue

Aadhaar (UIDAI)

Residential Address



Areas of the interest of the candidate (hobbies, talents etc.) \_\_\_\_\_

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Any other information about the candidate you would like to share with the school \_\_\_\_\_

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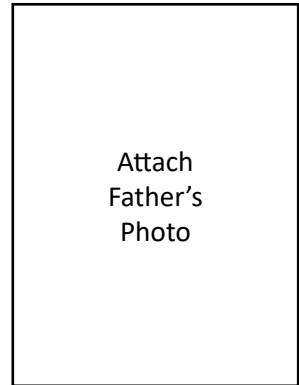
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### III. FAMILY INFORMATION

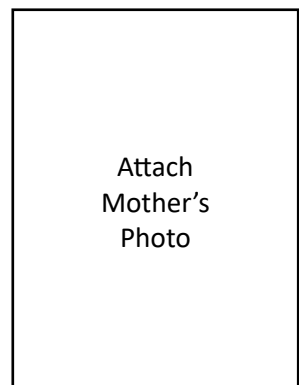
#### FATHER

- Name \_\_\_\_\_
- Date of Birth (DD/MM/YY) \_\_\_ / \_\_\_ / \_\_\_
- Nationality \_\_\_\_\_
- Religion \_\_\_\_\_
- Qualification \_\_\_\_\_
- Profession \_\_\_\_\_
- Employer \_\_\_\_\_
- Office Address \_\_\_\_\_  
\_\_\_\_\_
- Office Phone \_\_\_\_\_
- Residence Address \_\_\_\_\_  
\_\_\_\_\_
- Residence Phone \_\_\_\_\_
- Mobile \_\_\_\_\_
- Email \_\_\_\_\_



#### MOTHER

- Name \_\_\_\_\_
- Date of Birth (DD/MM/YY) \_\_\_ / \_\_\_ / \_\_\_
- Nationality \_\_\_\_\_
- Religion \_\_\_\_\_
- Qualification \_\_\_\_\_
- Profession \_\_\_\_\_
- Employer \_\_\_\_\_
- Office Address \_\_\_\_\_  
\_\_\_\_\_
- Office Phone \_\_\_\_\_
- Residence Address \_\_\_\_\_  
\_\_\_\_\_
- Residence Phone \_\_\_\_\_
- Mobile \_\_\_\_\_
- Email \_\_\_\_\_





#### IV. DECLARATION FORM

The following should be read carefully by the candidate's parents/guardian and signature(s) should be provided in the space below.

Name of Student \_\_\_\_\_

Grade Applying For \_\_\_\_\_

1. I/We have truthfully and to the best of my/our knowledge completed the application for the above named student and accept that this application form is only a request for admission and it does not guarantee admission to LFIS. I/We agree to pay admission fee within 10 days from the date of notification of confirmation of admission, failing which my/our ward's admission may be cancelled. I/We will not seek access to confidential teacher evaluation material's before or after my/our ward's admission. The undersigned releases every person and institution from any and all liability resulting from or pertaining to the furnishing of records, documents and other information provided to LFIS for this purpose. All materials submitted in support of this application become the property of LFIS and are kept confidential, and will not be released. If my/our ward is accepted for admission, I/We understand that admission will be assigned based on availability of seats. I/We understand and accept all rules relating to payment and refund of fees as mentioned in the Parent Handbook. I/We undertake to abide by the school rules that may change from time to time.
2. I/We understand that LFIS regulations forbid the use of drugs, alcohol and tobacco by all students, whether in school uniform or not. This rule applies whether the student is on or off campus. If admitted, I/We agree to abide by the principles of LFIS as mentioned in the Parent Handbook which prohibits students from resorting to unfair means during examinations, unauthorised absence from classes, damaging school property, causing injury to others, slander, obscene behaviour, stealing, vandalism, possessing and distributing pornographic and other objectionable materials and all other offences that are detrimental to the integrity, discipline and moral values of LFIS. The school reserves the right to take disciplinary action in the event of gross misconduct with regard to the same. The student will uphold moral values in the selection of movies, music, television, video or computer games, books, magazines, internet sites accessed, and other forms of entertainment. I/We understand and accept that all students of LFIS will voluntarily take part in school activities, functions, educational excursions and if required will stay back after school hours for purposes of rehearsal or related work.

	Father	Mother	Legal Guardian
Name	_____	_____	_____
Signature	_____	_____	_____

Date: \_\_\_ / \_\_\_ / \_\_\_ (DD/MM/YY)



## FOR OFFICE USE ONLY

### DOCUMENT CHECKLIST

Application Form	<input type="checkbox"/>
Student Health Form	<input type="checkbox"/>
Student Vaccination Card	<input type="checkbox"/>
Proof of Date of Birth	<input type="checkbox"/>
Mark Sheet	<input type="checkbox"/>
Aadhaar Card/Voter Card/Passport of Father & Mother or Legal Guardian	<input type="checkbox"/>
Passport of Student (Optional)	<input type="checkbox"/>
10 Passport size Photographs of Student (Current photographs)	<input type="checkbox"/>
2 Passport size Photograph of Father & Mother or Legal Guardian	<input type="checkbox"/>
Transfer Certificate	<input type="checkbox"/>

Date of submission \_\_\_\_\_

Admission Form Number \_\_\_\_\_

Student Identity Number Allotted \_\_\_\_\_

Admission for Grade \_\_\_\_\_

Date of Joining \_\_\_\_\_

Principal's Remark \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Signature & Seal  
(Lance Fort International School)



## STUDENT HEALTH FORM

Attach  
Student  
Photo

Please fill in the following information in BLOCK LETTERS in blue/black ink

Name of Student \_\_\_\_\_ Grade applied for \_\_\_\_\_

Student Address \_\_\_\_\_

Gender  Male  Female Date of Birth: \_\_\_ / \_\_\_ / \_\_\_ (DD/MM/YY)

In case of an Emergency, the school authorities should contact

1. Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Contact No. \_\_\_\_\_

2. Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Contact No. \_\_\_\_\_

Preferred Doctor/Family Doctor \_\_\_\_\_

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

Siblings(s) at Lance Fort International School:

1. Name \_\_\_\_\_ Grade \_\_\_\_\_

2. Name \_\_\_\_\_ Grade \_\_\_\_\_

3. Name \_\_\_\_\_ Grade \_\_\_\_\_

### Immunization History

All students must have completed their minimum vaccination requirements as per the National Immunization Schedules at the time of seeking admission. Please indicate the date of immunization in the space given below, and provide a photocopy of the vaccination card.

• BCG \_\_\_\_\_ • DPT/DTap \_\_\_\_\_ • Measeles \_\_\_\_\_

• MMR \_\_\_\_\_ • Typhoid \_\_\_\_\_ • Polio \_\_\_\_\_

• Hepatitis A \_\_\_\_\_ • Hepatitis B \_\_\_\_\_ • Chicken Pox \_\_\_\_\_





## Further Details

Brief medical history of the student (mention specific ailments) \_\_\_\_\_

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Does your ward take any medicines for chronic ailments? If yes, please mention the name \_\_\_\_\_

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Special instructions for the school to note \_\_\_\_\_

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Student is allergic to \_\_\_\_\_

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Student Blood Group \_\_\_\_\_

**I/We give my/our consent for emergency measures to be taken by the school Authorities if and when need the arises.**

	<b>Father</b>	<b>Mother</b>	<b>Legal Guardian</b>
Name	_____	_____	_____
Signature	_____	_____	_____

Date: \_\_\_ / \_\_\_ / \_\_\_ (DD/MM/YY)

*(Please note that the above information is required in order to provide the best medical care to your ward. Your kind cooperation is solicited).*