

MORAVIAN INSTITUTE

"Zhan – Phan – Ling", Rajpur, Dehradun, UK 248009 Telephones: 0135-2734358, 706030-6641, 706030-6638

e-mail: admissions@moravianinstitute.com

Please affix here a recent passport sized photograph of the child

APPLICATION for ADMISSION to HOSTEL SECTION in 2025-2026

To, The Principal							
Moravian Institute		Date of Subr	Date of Submission of this Application Form :				
	ian-Pha inur De	n-Ling" ehradun					
		nd 248009					
Sir	,						
l re	equest y	ou to kindly admit my son / daugh					
	nuestina	g admission I understand that his/h			CTION as a BOARDER. In	sion If	
		on time he/she* is not admitted d		•	_		
		pinding on me. I also understand th	•				
BE	ELOW A	ARE OTHER PARTICULARS RE	QUIRED				
1.	(a)	Date of Birth of child :	(b)	Place of Birth of ch	nild :		
2.	(a)	Nationality :	(b)	Caste / Tribe of Pe	ople :		
	(c)	Religious background :	(d)	Male or Female :			
3.	(a)	School being attended at presen	ne, address and phor	ne number) :			
4.		(a) Has the child lived in a host	el ?	(b) If so, when	and for how long ?		
5.		Class & Date for which admission		(0)			
		requested in Moravian Institute	Class	:	Date :		
6.		Father's name :		Mother's name :			
		Child's Siblings : Name	Gender	Year of Birth	Occupation		
					·		
	-	I is admitted, I have no objection to also promise that he/she, my fami			_		
-	•	and will cooperate in every way po	•		_		
	F.A	ATHER'S NAME		FATHER'S Signature MOTHER'S Signature			
	М	OTHER'S NAME					
LEGAL GUARDIAN'S NAME				LEGAL GUARDIAN'S Signature			

If parent/parents are not applying on behalf of the child, a proper reason must be given for this in a separate explanatory letter attached to this Application Form. The person who is applying in place of the parent/parents must be the **legal guardian**, who must submit a copy of the **Court Order** giving him/her guardianship of the child.

PARENTS'/ LEGAL GUARDIAN'S Permanent Address :										
Current Residential Address (if different from above) :										
Email ID: 1st LOCAL GUARDIAN'S	NAME		Mobile pho Relationship witl	ne No. n Child						
1st LOCAL GUARDIAN'S										
Email ID:			Mobile phone No.							
2 nd LOCAL GUARDIAN'S 2 nd LOCAL GUARDIAN'S			Relationship with Child							
Email ID:	Email ID: Mobile phone No.									
 List of Documents Required to be Submitted with this Application Form:- Birth Certificate of Child issued by municipality's Registrar of Births (if in city area), or Birth Certificate of child issued by Gram Pradhan (if in rural area), or Armed Forces Record. As per law, Affidavit / TC / other certification of Birth is NOT acceptable. Boarder's Medical Report Form (in the form provided by Moravian Institute) – completed. No other Medical Certificate will be accepted. 										
Please sub	mit this form wi	ith the Application Fee	. Refer to the Fee Sch	nedule for the amount.						
FOR OFFICE USE ONLY										
This Report was received	on <i>(date)</i> :	by	(Signature o	of Moravian Institute Staff)						
Hostel Application Fee Rs	s rec	eived on (date)	R.No							
Interview Results Physical Fundamentals: Athletic Development: Aesthetic Development: Emotional Development: Moral Development: Social Development:	issued by Medical Report Height Child for admiss	unicipality Gram Pro	HOSTEL and	d other considerations						
Hostel Application For	ostel Application Fee Rs received on (date) R.No									
Hostel Application Fee Hostel Security Deposit Hostel Admission Fee	Rs	received on (date) received on (date) received on (date)	R.No							
Other Contributions Other Contributions				(purpose) (purpose)						