



Indian Institute of Technology Indore Creche Facility

Admission Form

NOTE: All the details should be filled in BLOCK LETTERS

Registration in crèche facility: (fullday/halfday/non-regular): _____

For Academic Session _____

Child Information:

1. Name of the Child: _____

2. Date of Birth: __ : __ : __ : __ Gender: _____

3. Age as on 31 March : _____

4. Residential Address: _____

5. Nationality: _____

6. Language Spoken at Home: _____

7. Parent's Information:

	Father	Mother
Name		
Academic Qualification		
Telephone No. Residence		
Mobile No.		
Email Id.		
Occupation		
Designation		
Office Name and Address		

8. Information about previous school (if any): _____

Passport size
photo of the child

Address: Creche Facility, KV School Building, IIT Indore Campus, Simrol, Indore-452020

Email: creche-facility@iiti.ac.in

Phone: _____



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9. Please share something special about your child: _____

10. Know allergy/ illness/ permission for first add/ any other: _____

11. Registration Form Checklist:

- One passport size photo of the child, mother and Father
- Self-attested copy of birth certificate issued by municipal committee/corporation
- Self-attested copy of address proof
- Self-attested copy of father and mother Aadhar card and IITI Id cards
- Progress copy of previous school (if any)

Undertaking from the parents:

- a. I hereby certify that the above information is accurate to the best of my knowledge and belief.
- b. I fully understand the school, on the accepting the registration form of my child, is not bound to grant admission.
- c. I acknowledge that the registration fee is not refundable, and I have read the rules and regulation of school and understood the same.
- d. I agree to follow and ensure that my child abides by all the rules, regulation and procedure laid down by the school time to time.

Name of the Mother: _____ Signature of the Mother: _____

Name of the Father: _____ Signature of the Father: _____

Photo of father

Photo of mother

Received on (Date):	For Office Use Only Received By:	Signature:
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