Dr. B. S. Moonje Marg, Rambhoomi, Nashik – 422005, ☎0253-2309608 🗕 bms.bhonsala.in 🖂 commandant@bms.bhonsala.in

REGISTRATION APPLICATION FORM FOR JUNIOR COLLEGE SCIENCE STREAM - ACADEMIC YEAR 2023-24

FOR OFFICE USE ONLY							
Passed S.S.C. Exam Of	我 最	Board	10.10	Year	44.		
MARK SHEET VERIFIED	RAPIA SET	(050)	834 61	MER	铁龙黄		
	Marks Obtain	ed Marks Out o	f Overall Perce	entage			
Science		- C. Millian II.	Admission Required	Boarder	Day Sch <mark>o</mark> lar		
Mathematics							
The state of the s			C	hecked By	E 0		
Remark							
ADMITTED	ADMITTED NOT ADMITTED		PRINCIPAL CON		MANDANT		
FEES PAID							
Particulars	Fees	Fees Paid	Receipt No &	Date	Sign		
Prospectus & Registration	1,100						
Admission Confirmation (Non Refundable)	10,000						
First Installment Fees	1,00,000						
Second Installment Fees	1,00,000						
Jr. College Total Fees	2,10,000						

To,		Da	ate:

Commandant

Bhonsala Military School, Nashik - 422 005.

Dear Sir,

I wish to apply for admission of my son / ward in [XI / XII -SCIENCE] Std.

APPLICANT'S INFORMATION	[IN CAPITAL LETTERS ONLY]
Student's Name (Full Name)	
Father's Name (Full Name)	
Mother's Name (Full Name)	

Date Of Birth (DD/MM/YYYY)					Blood Group			Place of Birth					
DOB in words				L							I .		
Caste	Sub	-Caste				Reli	gion			Cate	gory		
Mother Tongue				Nationality									
Student Aadhar Number													
Particulars of Parents / Gu	ardian				-								
Particulars	Occu	pation Designation		n	Educational Qualification			Annual Income					
Father's	75	B						A.S.	W 15	(40 L			
Mother's	語	AL.	50						BB			A 6 i	<u> </u>
Guardian's (If Required)			II)	IIII IT		4					4		
Postal Address	Pin	Code					State						
	Mobile Number			•	E-mail Address								
Student's													
Father's													
Mother's													
Guardian's (If Required)													
		JU	NIOR	COLL	.EG	SE SI	UBJEC	CTS					
Compulsory Subjects					Optional Subjects (Please ✓ any two subjects)						5)		
 English General Knowledge Physics Chemistry 						5) Mathematics6) Defence Studies							

I hereby attach the following attested Xerox copies of each.

A) For students of S.S.C. Exam, from Maharashtra State Board of Secondary & Higher Secondary Education

- 1) School Leaving Certificate (duly counter signed by District Education Officer)
- 2) Mark Sheet of Board Examination.
- 3) Certificates-First Attempt and Character from the School.

B) For students of S.S.C. Exam, from out of Maharashtra or other than Maharashtra State Board of Secondary & Higher Secondary Education (ICSE or CBSE etc.)

- 1) School leaving Certificate / Transfer Certificate.
- 2) Mark Sheet of Board Examination.
- 3) Passing Certificate of Board Examination.
- 4) Certificate: First attempt certificate and character certificate from the school.
- 5) Migration Certificate in Original after confirmation of admission.
- 6) Eligibility Certificate from Nashik Divisional Board after confirmation of admission.
- 7) COVID-19 Vaccine Certificate

Admission_Form_2023-24

DECLARATIONS OF GUARDIANS

a)	a) I (Name)	am willing to admit my								
	son/ward	in Bhonsala Military School, Nashik-5 for two years in the								
	Junior College at my own risk and	will have no claims on authorities for any compensation in the								
	event of any injury or unusual incide	nt due to any accident during training and travelling from his date								
	of joining the school.									
b)	o) I know the Junior College is a TWO	know the Junior College is a TWO YEAR COMPOSITE COURSE and I will NOT WITHDRAW my son /								
	ward after passing XI Class F.Y.J.C.	Mark Barran								
c)	c) I hereby declare that I have made m	yself acquainted with the rules and regulations of the school and I								
	accept and agree to abide by them a	s long as my son/ward remains in the school.								
d)	d) My son/ward is mentally & physica	ally fit. The Medical Fitness Certificate from a Register Medical								
	Practitioner is attached herewith.									
e)	e) I will obtain the eligibility certificate	from Maharashtra State Board of Secondary & Higher Secondary								
	Education, Nashik Divisional Board, I	Nashik and submit within 15 days.								
Pla	Place :									
Da	Date :									
	Signature of Student	Signature of Parents (Father/Mother)								
Ful	Full Name	Full Name								
Recent Passport Size Photograph		Signature of Guardian								
	Not Before 01 st March	Full Name								
iviarch		Relation with Ward								

MEDICAL CERTIFICATE

(To be filled in by the family physician or Medical officer [M.B.B.S. OR M.D.])

I have medically	y examined Master	and in my opinion he is fit to undergo the			
Regular School	admission in Military School as mentio		-		
1) He is no	ot knock kneed, epileptic or flat footed	and has been	duly inoculated / va	accinated.	
2) He is al	lergic to	Height _	cms Weight	Kgs. BMI	
3) Blood (
•	est CBC blood test report is attached				
•	s not have any simptoms of COVID 19.				
,	, ,				
Place :			Signature		
Date :	三		Name	9	
	一	(,)	Reg. No.	W 12.6 B A A	
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No was as as	INDEMNITY DO	NID AND	CEDETEICA	(DE	
	INDEMNITY BC	IND AND	CERTIFICA	AE.	
Marine Committee					
1) I Confirm th	nat my ward / son is physically and me	edically fit to	undertake the rigor	ous training of the course.	
2) I agree to a	dhere strictly to the rules and discipl	ine of the co	urse and abide by t	the directions of the organizing	
authority or the	e nominee at all times during the cour	se, failing wh	ich I shall be liable	for expulsion.	
3) In case of a	ny inj <mark>ury, accident or sickness</mark> I or an	v member of	my family shall no	t hold responsible the Bhonsala	
	ol or the instructors or any staff who	•	•	•	
•	will be claimed by me.	ny or partian	y criner marviadan	y or jointry responsible and no	
•	•			. f:1	
- ·	clare that to the best of my knowled			•	
•	cap him in undergoing the course. I ar	0.1	1 0	•	
5) I also hereb	y declare that if my son/ward leaves	school campu	s without authentic	ated permission, I will not held	
responsible to	any staff appointment of Bhonsala M	Iilitary Schoo	l or the instructors	or any staff wholly or partially,	
either individu	ally or jointly and no compensation w	ill be claimed	l by me.		
6) This Indem	nity bond / certificate is given by me	with due dilig	ence & on the basis	s of information imparted to me	
	filitary School authorities.				
3	3				
Signature of	Guardian / Parents			Signature of Student	
0	ardian / Parents			Signature of Student	
Name of Gua				_	
D 1 41 11	2.1 1	D 4	DI		
Relationship	with ward	_ Date	Place		
Witness Sign	1)		2)		
Withcas Sign	1/		2)		
Name	1)		2)		
Address					
Mobile No					