



Central Hindu Military Education Society's
BHONSALA MILITARY SCHOOL

Dharmaveer Dr. Moonje Marg, Rambhoomi, Nashik - 422005.
Ph.: (0253) 2309605 / 2309608, E-mail : commandant@bms.bhonsala.in

APPLICATION FORM

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For Office Use only
Selected / Not Selected

Year :

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To,
The Commandant,
Bhonsala Military School,
Nashik - 422 005.

Principal/Commandant

Students
Recent
Photograph
(within 3 months)

I wish to apply for admission of my son / ward in () Std.

APPLICANT'S INFORMATION (IN CAPITAL LETTERS ONLY)

Student's Name _____

(Start with Surname) Surname Student Name Father Name

Date of Birth : _____ Place of Birth : _____

DOB in words : _____

Aadhar No. _____

Permanent Address : _____
(Home) : _____

State : _____ PIN Code : _____

Phone : _____ Medium : (Hindi / Marathi / English)

Mobile (Compulsory): _____ Nationality : _____

E-mail (Compulsory): _____ Caste : _____

Religion : _____ Sub Caste : _____

Std. in which he is studying _____ Mother Tongue : _____

Last Year Final Exam. (Mention Class)	Marks	Out of	% Obtained	Current Year Mid-term Exam	Marks	Out of	% Obtained

Father's Name : _____ Education Qualification \ : _____

Profession : _____ Annual Income (Approx) in Rs. : _____

Mother's Name : _____ Education Qualification : _____

Profession : _____ Annual Income (Approx) : _____

P.T.O.

Declarations of Guardian/Parent,

1. I (Name) am willing to admit _____ my son ward in Bhonsala Military School, Nashik-5 at my own risk & will have no claims on authorities for any compensation in the event of any injury or unusual incident due to any accident during the stay / training traveling from his date of joining the school.
2. hereby declare that have made my myself acquainted with the rules & regulations of the school & accept & agree to abide by them as long as my son / ward remain in the school. shall not hold school authorities responsible for the safety of my son / ward.
3. I shall regularly pay in advance the annual school fees & meet all the incidental expenses at the school if my son/ward is admitted to the school.
4. My son / ward is mentally & physically fit. The Medical Fitness Certificate from a Registered Medical Practitioner is attached herewith.

Date :

Place :

Signature of Guardian / Parent

The application must be accompanied by (checklist)

- 1) ₹ 1100/- transfer amount on following bank details for obtaining by post along with application
Name - Commandant, Bhonsala Military School Nashik.
Bank Name - HDFC Bank Branch Name - Thatte Nagar, Nashik.
Account No. 50100217027870
IFSC Code - HDFC0000064
- 2) Progress report of the Annual Exam of the last year.
- 3) Progress report of the Mid-term Exam, Current Year (True Copy)
- 4) Xerox copy of the Birth Certificate of the candidate, as issued by the village or municipal authorities. or by the head of the registered nursing home, or by the medical practitioner who delivered the child (with his medical council registration number) No affidavits or school certificates are acceptable.
- 5) Xerox copy of Caste Certificate.
- 6) Xerox Copy of Aadhar Number.

INDEMNITY BOND AND CERTIFICATE

- 1) I confirmation my ward/ son is physically and medically fit to undertake the training of the school curriculum.
- 2) I agree to adhere strictly to the rules and discipline of the school and abide by the directions of the school authority. Failing for which my ward shall be liable for expulsion from admission
- 3) In case of any injury, accident or sickness to my ward, will not hold responsible Bhonsala Military School or the instructions or any staff wholly or partially either individually or jointly responsible and no compensation will be claimed by me.
- 4) hereby declare that to the best of my knowledge, my ward does not suffer from any ailment or disability likely to handicap his undergoing the school routine.
- 5) I also here by declare that it my son / ward leaves school campus without authenticated permission, I will not held responsible to any dignitary of Bhonsala Military School or the instructions or any staff wholly or partially. either individually or jointly and no compensation will be claimed by me.
- 6) The indemnity bond/ certificate is given by me with due diligence & on basis of information imparted to me by Bhonsala Military School authorities. have completely understood the information.

Signature of Guardian/Parent**Signature of Applicant**

Name of Local Guardian _____ Mobile No. _____

Address _____

Relationship with ward. _____ Date _____ Place _____

Witness Sign.

1.

2.

Name

Address with
Mobile No, & E-mail ID**INCOMPLETE FORM IS LIKELY TO BE REJECTED**