



Application Form

Academic Year : 20..... 20.....

Application No. :

Name of the Student :

Class for which admission is sought :



Founder's Message

Welcome to Little Krishna Montessori School. We believe every child is unique and deserves a joyful, nurturing environment to learn and grow. Through the Montessori approach, we encourage independence, confidence, and a love for learning. We look forward to partnering with you in your child's journey.

Warm regards,
Mr. Vinoth Kumar
Founder
Little Krishna Educational Institutions

Director's Message

At Little Krishna Montessori School, we believe that every child is unique, capable, and full of potential. Our mission is to nurture young minds through a holistic, child-centered approach that builds confidence, independence, and a lifelong love for learning.

Inspired by the philosophy of Dr. Maria Montessori, we provide a thoughtfully prepared environment where children learn through exploration, hands-on experiences, and meaningful activities. We focus not only on academic excellence but also on developing essential life skills, values, and social responsibility.

We understand that the early years are the foundation of a child's future. With a team of dedicated and passionate educators, we ensure that every child receives individual attention and the freedom to grow at their own pace in a safe, joyful, and stimulating environment.

At our school, education goes beyond books—we aim to shape confident, compassionate, and responsible individuals who are ready to embrace the future.

We warmly welcome you to be a part of our learning community and partner with us in shaping a bright and successful future for your child.

Warm Regards,
Mrs. Anjali Vinothkumar
Director
Little Krishna Educational Institutions



Our Growing Family

At Little Krishna Montessori School, we are proud to nurture young minds across multiple locations with a commitment to quality education, care, and Montessori excellence.

Each of our branches is thoughtfully designed to provide a safe, joyful, and child-centered learning environment, guided by trained educators and a strong foundation in Montessori principles.

Our Branches

- * Little Krishna Montessori School – Bargur
- * Little Krishna Montessori School – Sigaralapalli (Kameshwar Vidhayalaya Matric School Campus)
- * Little Krishna International Montessori Teacher Training Institute – Krishnagiri / Bargur

Our Commitment

We ensure:

- Consistent Montessori-based learning approach
- Qualified & trained teachers
- Focus on holistic child development
- Safe and nurturing environment



Instructions: * Please fill the application form in CAPITAL letters only. * The application form is invalid without the signature of the parent/guardian. * Submission of the application form does not mean granting of admission. * The date of birth and the spelling of the pupil's name should be according to the last school records. * The certificate from the previous school stating the date of birth and the progress report/transcript of the last examination appeared is mandatory. * If admission is not granted, the registration fee will be refused. * Please attach extra sheets for any additional information that you may wish to provide. * It is the responsibility of the parent/guardian to intimate the school in writing if there are any changes in the details provided in the application form. * Approved visitors must be 18 years and above.

Please ensure that all the following documents, which are required to complete the admission process are submitted

* At the time of application: * Completed application form. * Progress report of the last Class attended. Previous school record form. * Rules and regulations, signed by the parent in acceptance. * Two passport size photographs of the student. * Two passport size photographs of the parent/guardian.

* Upon receiving the provisional letter of admission: * Original birth certificate. * Transfer Certificate from the previous school. * One passport size photograph of each of the approved visitors. * Medical history form.

APPLICANT INFORMATION

Surname (in capital letters)

Name (in capital letters)

Date of Birth

Day

Month

Year

Age (as on 31st March)

Gender (Male/Female)

Nationality

Religion

Mother Tongue

Caste (for statistical purpose only)

Aadhar No.

Present Address

Pin Code

State

Res. Phone

E-mail

Permanent Address

Pin Code

State

Res. Phone

E-mail

ADMISSION INFORMATION

Class for which admission in sought

Second language

Name of the Previous School (if any)

Please attach
a recent
color photograph
of applicant.

Attach a recent colour photograph of Father

Do not staple

Attach a recent colour photograph of Mother.

Do not staple

Attach a recent colour photograph of Guardian

Do not staple

1 additional passport size photograph to be submitted with the form. Father's, Mother's & Guardian's name to be written on the reverse.

Please attach a recent family photograph (Father, Mother & Child) for school records and better understanding of the child's environment.

LANGUAGES KNOWN (Please tick in the appropriate box)

To Speak To Read To Write

Language

To Speak To Read To Write

Language

To Speak To Read To Write

Language

To Speak To Read To Write

Language

PROFICIENCY IN ENGLISH ACCORDING TO THE AGE AND LEVEL

To Speak: Very Good Good Fair Poor

To Write: Very Good Good Fair Poor

To Read: Very Good Good Fair Poor

PREVIOUS ACADEMIC RECORD (If any)

Grade	Name of the school attended	Country or State	Board	Academic Year	Medium	Second Language	Third Language
PLAY GROUP							
PRE KG							
LKG							
UKG							
I							
II							
III							
IV							
V							

SIBLING DETAILS (Any Brother(s) / Sister(s) presently studying in any of the Little Krishna Educational Institutions)

Name/s of Siblings	Age	Class	Name of the School / College

ACADEMIC AND EXTRA-CURRICULAR PROFILE

a) List the academic achievements, (if any) of your child:

b) List the extra-curricular achievements of your child:

c) Has a learning assessment ever been requested or completed? (If Yes, Please explain and provide the report)

d) Does the student have any health concerns, allergies, etc. that the teacher / care taker should be aware of? (Please enclose necessary documents)

e) Has the student ever been asked to leave any school because of behavioural / disciplinary problems?

(If yes, please explain)

f) Is there any other information about the student that the teacher should know?

g) What are your expectation from The Little Krishna Montessori School? (State in order of priority by providing serial numbers)

- | | | |
|--|--|---|
| <input type="checkbox"/> Top Quality Education | <input type="checkbox"/> Extra Curricular Activities | <input type="checkbox"/> Communication Skills |
| <input type="checkbox"/> General Discipline | <input type="checkbox"/> Uniformed Services | <input type="checkbox"/> Specialised coaching, exposure and encouragement in sports & games |

If others, specify:

Example:

- | | | |
|--------------------------------|--------------------------------------|---|
| 2 Top Quality Education | 4 Extra Curricular Activities | 1 Communication Skills |
| 3 General Discipline | 6 Uniformed Services | 5 Specialised coaching, exposure and encouragement in sports & games |

IDENTIFICATION MARKS

1. _____

2. _____

DECLARATION BY THE PARENT

1) It is hereby certified that all information provided to the school regarding age, health, class, etc pertaining to our ward

is correct. At any point of time, if this information is found to be false, forged, incorrect or misinterpreted, then we are responsible for the same and we understand that immediately the admission will be held null and void.

2) We have read & understood the Guidelines & Policies stated in this booklet.

Date:

Signature of the Parent / Guardian

FOR OFFICE USE ONLY

CERTIFICATES

Certificates	Whether Enclosed		Xerox / Original
1. Transfer Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	
2. Birth Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	
3. Marks Statement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	
4. Community Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	

Certificates verified, found correct and filed

Date:

Signature of the Admission In-charge / Office Clerk

ADMISSION NOTE

Master / Miss _____ represent that I have the authority to admit

S/o / D/o Mr / Ms _____ has been admitted in class _____

Group _____ Admn. No. _____

Principal
Date:

Director
Date:

CASHIER'S NOTE

Received Rupess _____

From Mr / Mrs _____ F/o / M/o _____

towards school fees as per rules.

Admission Number allotted

Entered in the Admission Register on Page No.

Admission Clerk
Date:

Principal
Date: