

**APPLICATION FORM  
TO BECOME ASSOCIATE SCHOOL OF  
MAHARISHI VIDYA MANDIR SCHOOLS GROUP**

*(Please fill in complete information)*

1- NAME OF THE SCHOOL .....

2- NAME OF THE TRUST/SOCIETY .....

3- DATE OF ESTABLISHMENT OF SCHOOL

4- DATE OF ESTABLISHMENT OF THE TRUST/SOCIETY

(Please enclose registration certificate, memorandum of association, bylaws and current list of members/trustees of the Trust/Society)

5- ADDRESS OF SCHOOL .....

.....  
.....

6- REGISTERED ADDRESS OF THE TRUST/SOCIETY .....

.....  
.....

7- PHONE AND FAX NUMBERS OF SCHOOL

AREA CODE

PHONE NUMBER

8- PHONE AND FAX NUMBERS OF REGISTERED OFFICE OF THE TRUST/SOCIETY

AREA CODE

PHONE NUMBER

9- EMAIL ADDRESS OF SCHOOL AND THE TRUST/SOCIETY.....

10- CLASSES FROM STANDARD \_\_\_\_\_ TO \_\_\_\_\_

11- TOTAL NUMBER OF STUDENTS

12- NUMBER OF SECTIONS CLASS WISE

CLASS	NUR.	KG	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII
NO. OF STUDENTS														
NO. OF SECTIONS														

13- MEDIUM OF INSTRUCTIONS: HINDI  ENGLISH  ANY OTHER \_\_\_\_\_

14- AFFILIATION STATUS: CBSE  ICSE  STATE EDUCATION BOARD

15- AFFILIATION NUMBER \_\_\_\_\_ YEAR

16- SCHOOL AIDED  UNAIDED

17- DETAILS OF LAND: OWNED  RENTED

● AREA IN SQFT \_\_\_\_\_ DATE OF REGISTRATION

● LAND OWNER'S NAME AND ADDRESS .....

.....

.....

● IF RENTED PREMISE: DURATION OF LEASE/RENT AGREEMENT \_\_\_\_\_ YEARS

● IF LEASE/RENT DEED IS REGISTERED: YES  NO

18- BUILDING: TOTAL SQFT  NUMBER OF CLASS ROOMS

CONFERENCE HALL/AUDITORIUM: YES  NO  LABORATORIES: MATH  BIOLOGY

CHEMISTRY  PHYSICS  COMPUTER  READING ROOM  MUSIC ROOM

SPORTS ROOM  REST ROOMS  HOSTEL

(Please enclose photocopy of land documents-registration, mutation, approved building plans, different NOCs and all four side photographs of all buildings. In case the property is leased/rented, please enclose lease/rent deed)

19- DISTANCE FROM CITY CENTRE  KM DISTANCE FROM BORDER OF THE CITY  KM

20- NUMBER OF HIGHER SECONDARY SCHOOLS IN THE CITY/TOWN

● SCHOOLS MENTIONED ABOVE ARE AFFILIATED WITH CBSE  STATE BOARD

● NUMBER OF STUDENTS IN EACH OF ABOVE MENTIONED SCHOOLS  
(Please enclose list)

21- PLAY GROUNDS: (Describe the play fields in a separate sheet)

22- OTHER INFORMATIONS:

NUMBER OF COMPUTERS  NUMBER OF PRINTERS  PHOTO COPY MACHINE

LCD PROJECTORS  LIBRARY: NUMBER OF SUBJECT BOOKS

REFERENCE BOOKS  PERIODICALS  DAILIES  AUDIO CDs   
 VCDs/DVDs

- TEACHING STAFF: TOTAL  NTT  PRT  TGT  PGT
- TRAINED TEACHERS AS PER CBSE/STATE EDUCATION BOARD NORMS
- UNTRAINED TEACHERS

(Please enclose list of teachers with their name, qualification, date of birth, experience, basic pay, allowances, deductions and gross salary)

- DETAILS OF ADMINISTRATIVE STAFF:
- ADMINISTRATIVE OFFICER  OFFICE ASSISTANTS  LAB ATTENDENT   
 COMPUTER OPERATOR  ACCOUNTANT  ACCOUNTS CLERK  SECURITY STAFF   
 DRIVERS  CONDUCTORS  GARDENERS  PEONS  OTHERS

23- INCOME, EXPENSES AND NET SURPLUS OR LOSS FOR LAST FIVE YEARS:

YEAR	INCOME	EXPENSES	NET SURPLUS	LOSS

(Please enclose photocopies of balance sheets including annexures)

24- PLEASE DESCRIBE SPECIAL FEATURES OF THE SCHOOL ON SEPARATE SHEET.

25- PLEASE ENCLOSE SAMPLE PAMPHLET, BROCHURE, LEAFLET, POSTERS, PROSPECTUS, SCHOOL MAGAZINE OF YOUR SCHOOL.

26- DEMAND DRAFT Rs. \_\_\_\_\_ DATE \_\_\_\_\_  
 DD NO. \_\_\_\_\_ BANK \_\_\_\_\_

27- ANY OTHER INFORMATION – (Please use separate sheets)

**DECLARATION**

I/WE DECLARE THAT ALL INFORMATION FURNISHED ABOVE IN THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND IF FOUND INCORRECT, THE **MAHARISHI VIDYA MANDIR SCHOOLS GROUP** WILL HAVE DISCRETION TO REJECT THIS APPLICATION AT ANY TIME.

DATE : \_\_\_\_\_  
 PLACE : \_\_\_\_\_ SIGNATURE, FULL NAME AND POST OF AUTHORISED SIGNATORY