
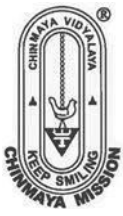
	HARI OM CHINMAYA SHISHU VATIKA “SANDEEPANY KAILAS”, KUNDANBAGH, BEGUMPET, HYDERABAD – 500016.	
SCHEDULE OF PROCESS FOR ADMISSIONS INTO L.K.G. FOR THE ACADEMIC YEAR (A.Y.)2025-26		
DETAILS	SCHEDULE	
Date of Birth of the Child	Born between 01.04.2020 to 31.03.2021	
Cost of Application form along with SWAD Book & Prospectus.	Rs. 500/- (Non refundable)	
LKG Admission Notification Scrolling in the Website	04.01.2025 (LKG New Admissions for the A.Y. 2025-26 will be opened on 07.01.2025 in the website)	
Download Application Form from the Vidyalaya website.	7 th – 11 th January, 2025 (Tuesday – Saturday)	
Submission of Filled in Application Forms in the office	7 th - 11 th January 2025 (Tuesday – Saturday) Timings: 10:00 am – 3:00 pm in the Vidyalaya premises	
Drawl of applications	18 th January, 2025 (Saturday)	
Display of Provisionally Shortlisted Candidates	20 th January, 2025 (Monday) Timings: 11:00 am	
Child interaction with teachers and verification of original documents in the Vidyalaya Premises	21 st – 23 rd January, 2025 (Tuesday - Thursday) Timings: 10:00 am – 12:00 noon 3:00 pm – 5:00 pm	
Payment of Fee	21 st – 25 th January, 2025 (Tuesday – Saturday)	
Fee Structure	Will be intimated during the meeting with the parents	

Attach the following documents (Mandatory) to the filled in application form.

1. Photocopy of Date of Birth Certificate.
2. Photocopy of Aadhaar of the child, mother & father.
3. Latest fee receipt of the Sibling, if applicable
4. Affixing latest passport size photograph of the child is mandatory on the Application Form.



CHINMAYA SHISHU VATIKA

"Sandeepany Kailas", Kundanbagh,
Begumpet, Hyderabad-500 016.



APPLICATION FORM FOR L.K.G. FOR THE ACADEMIC YEAR-2025-26

Student
Photo

1. Name of the Child with surname in block letters: _____

2. Date of Birth : _____

3. Age as on 1st April, 2025 : _____

4. Student Aadhaar Number : _____

5. Father's Name: _____

Qualification _____ Aadhaar Number _____

Occupation _____ Annual Income (Approx) _____

Mobile Number _____ Email ID _____

Residential Address & Phone No _____

Office Address & Phone No. _____

6. Mother's Name: _____

Qualification _____ Aadhaar Number _____

Occupation _____ Annual Income (Approx) _____

Mobile Number _____ Email ID _____

Office Address & Phone No. _____

7. Details of Siblings already Studying in Chinmaya Vidyalaya, Begumpet, Hyderabad.

Name _____ studying in Class _____ Section _____

8. Whether child has attended any Nursery School:

(a) If Yes, Name of the School :

9. Skills: Kindly write "Yes" or "No" :

(a) Can Child recognize? :

(i) Objects _____ (ii) Colours _____ (iii) Pictures _____

(b) Speaking ability / Speaks fluently : _____

(c) Languages child can understand

(i) Hindi _____ (ii) Telugu _____ (iii) English _____

(iv) Any Other Language _____ (d) Can child write English Alphabet? _____

10 Mother Tongue : _____

11 (a) Has the child been vaccinated against Polio, Diphtheria, Tetanus and any other preventive measures? : _____

(b) If so, when was it administered last? : _____

(c) Has the child suffered any serious illness requiring hospitalization? If so, please give details. : _____

(d) Have you checked the child's weight gain in the last one year? : _____

(e) Is the child allergic to any food items or medicines? If so, please give complete details. : _____

(f) Does the child suffer from any epilepsy attacks? : _____

(g) Have you noticed any loss of hearing? _____

(h) Have you checked the eyesight? : _____

12 Have you noticed any unusual behaviour of the child, which in your opinion, the teacher must be aware of : _____

13 Is the child trained to eat food on his/her own? Is there any special care that we have to take in this regard? (We do not allow parent to contact the Ayaas for special attention to any child). : _____

14 Approximate distance from residence to Chinmaya Shishu Vatika : _____

We solemnly affirm and sincerely declare that particulars furnished above are correct.

Date: _____

Signature of the Parent: _____

NOTE: Kindly answer all the above questions carefully and correctly since we would like to take note of any special attention that the child may require.



CHINMAYA VIDYALAYA

Affiliated to CBSE, Affiliation No. 3630042
(Under the Management of : Chinmaya Seva Trust , Hyderabad)
SANDEEPANY KAILAS, KUNDANBAGH, BEGUMPET,
HYDERABAD - 500 016. Phone : 23418012



ACKNOWLEDGEMENT FORM FOR LKG ADMISSION FOR THE ACADEMIC YEAR 2025-26 (TO BE FILLED BY THE PARENT)

Date _____

Name of the Child : _____
(in block letters)

Date of Birth : _____

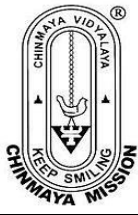
Father's Name : _____

Sibling Name : _____ Class _____ Section: _____

(Presently studying in Chinmaya Vidyalaya and attach progress card of the sibling for the academic year 2024-25)

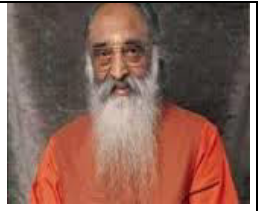
Signature of the Parent





CHINMAYA VIDYALAYA

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HYDERABAD - 500 016. Phone : 23418012



ACKNOWLEDGEMENT FORM FOR LKG ADMISSION FOR THE ACADEMIC YEAR 2025-26 (TO BE FILLED BY THE OFFICE)

APPLICATION REGISTRATION No.: _____
(for drawl of Random tokens)

Signature of the Office Assistant