

INFORMATION SHEET

GATE PASS

Date of Entry ____/____/____ Time of Entry _____

	(To be filled by parents in block letters before arrival)	(To be filled by school staff)	
	Name	Relation with student	Temperature Check
Student & Class		---	
Accompanier 1			
Accompanier 2			

Place of origin of travel: _____ Vehicle no.: _____ Mob. no.: _____

TO BE FILLED BY SCHOOL STAFF

Consent Form		Teacher -in-Charge	
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TO BE SUBMITTED TO THE WARDEN AFTER CLEARANCES

DOCUMENTS

Date ____/____/____

(To be filled by parents in block letters before arrival)			
Student's Name		Sec. & Class	

(To be filled by the School Nurse at the medical counter in the school)		
Temperature	Medical Details Form	Consent letter
Verified by the School Nurse:		

Declaration Form	For Class IX Only – Option Form	Reporting time: _____
		Warden's Initials: _____

ACCOUNTS CLEARANCE

(To be filled by School Staff at the Accounts counter in the school)		
Fees cleared:	Pending Amount	
YES / NO	Rs. _____	Accounts Dept. Initials: _____