



To be completed by authorised signatory at the Gurudwara

Please answer the following questions:

Name of the Authorised Signatory completing this form	
Position of the Authorised Signatory at the Gurudwara	
Name and Full Address of the Gurudwara	
Telephone Number of the Gurudwara/Signatory	
Name of the child applying at Nishkam Primary School Wolverhampton	
Name of parents/guardian(s)	

The signatory named above must answer the following:

1	I confirm that the child and the parent/guardian(s) named above are known to me. (Tick Yes or No)	☐ Yes	☐ No	
2	I confirm that the child named above was initiated as a Khalsa with <i>Khanda-di-Pahul</i> during <i>Amrit Sanchar</i> initiation. (Tick Yes or No) If your answer is Yes please provide the details in the last column	☐ Yes	☐ No	Gurudwara where initiation took place: Address of the Gurudwara: Date of initiation:
3	I confirm that the parent/guardian(s) was/were initiated as a Khalsa with <i>Khanda-di-Pahul</i> during <i>Amrit Sanchar</i> initiation. (Tick Yes or No) If your answer is Yes please provide the details in the last column	☐ Yes	☐ No	Gurudwara where initiation took place: Address of the Gurudwara: Date of initiation:
4	I confirm that the child named above is <i>Keshadhari</i> (has uncut hair). (Tick Yes or No)	☐ Yes	☐ No	

Signature of the Authorised Signatory at the Gurudwara (Please provide full name):	Date:
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Please provide the most updated stamp from the Gurudwara below:

Once this form is completed, please upload it to <https://www.nishkamschooltrust.org/npsw/npsw/admissions/how-to-apply/place-of-worship-forms-and-other-documents>