



Registration Form (Class ____)

Session:- _____

Photograph of Student

Applied For Class :	Applicant's Name :
Date Of Birth :	Gender :
Date of Birth In Words :	Religion :
Blood Group :	Stream :

RESIDENTIAL ADDRESS	
House No :	State :
Area :	Phone 1 :
City :	Phone 2 :
Pincode :	Mobile :

FATHER'S PARTICULARS	FATHER'S OFFICE DETAILS
Name :	Organization :
Occupation :	Address :
Email :	City :
Mobile :	Pincode :
Father Aadhar No :	State :
Father Voter ID :	
Father Nationality :	

MOTHER'S PARTICULARS	MOTHER'S OFFICE ADDRESS
Mother name :	Organization :
Occupation :	Address :
Email :	City :
Mobile :	Pincode :
Mother Aadhaar No :	State :
Mother Voter ID :	
Mother Nationality :	

PREVIOUS SCHOOL DETAILS	
School :	Previous Class :
Address :	

IS A SIBLING OF THE STUDENT STUDYING IN THIS SCHOOL	
Name :	Admission No :
Class :	Section :

DETAIL FOR TRANSFER OF PARENT

Transfer Of Parent : Reason :

NOTE : Please Attach Proof of Transfer From Your Office**CERTIFICATE FROM THE PARENTS**

I/We hereby declare that the above information provided by me/us is correct and I/We understand that if the information is found to be incorrect or false, my/our ward shall be automatically debarred from selection/admission process without any correspondence in this regard. I/We also understand that the application/registration does not guarantee admission to my/our ward. I/We accept the process of admission undertaken and I/We will abide by the decision taken by the school authorities.

Father's Name : Mother's Name :

Signature : Signature :

APPLICATION NO : _____
(For Office Use Only)**ADMIT CARD – CLASS ____ (2020-2021)**

Photograph of Student



Applicant Name :

Father's Name :

Contact No. :

Class Teacher

H.O.D/Coordinator

Principal/Manager