

REGISTRATION FORM

Note: The form should be filled by the parents

Reg. No.

Class in which admission is sought: _____ Session: _____

Affix recent
Passport size Photograph
of the child

PARTICULARS OF THE CHILD

Name of the child (in block letters) First Name Middle Name Last Name

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D.O.B

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 (in words) _____

Name of the present school : _____

Age : Years Months Gender: Male Female

Mother tongue: _____ Nationality: _____ Religion: _____

Category: GEN SC ST OBC Any Other _____

Present address: _____

Contact number:

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 Email: _____

PARTICULARS OF PARENTS

	FATHER	MOTHER
Name		
Age		
Qualification		
Occupation		
Organisation/ Employer		
Address (Business/Office)		
Contact No.		
Email		

Affix Recent
Passport Size Photograph
of The Parent

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Passport Size Photograph
of The Parent

SIBLING DETAILS

Name of Siblings	Brother / Sister	Age	Class	Name of School

School Transport

Yes No

Own Arrangement (Escorted) Yes No

KINDLY FILL THE FOLLOWING DETAILS

Does your child have any Medical Ailment / Special Needs / Learning Difficulties?

What are your expectations from the school and the teachers for your child?

DOCUMENTS REQUIRED FOR ADMISSION

Tick as relevant:

- | | |
|--|--------------------------|
| A. Attested photocopy of official Birth Certificate | <input type="checkbox"/> |
| B. Ration Card / Voters Card / Aadhar Card or other valid documentary proof of residence | <input type="checkbox"/> |
| C. Passport size photographs of parents (one each) | <input type="checkbox"/> |
| D. Relevant authenticated certificate (in case of SC / ST / OBC / others) | <input type="checkbox"/> |
| E. Medical Certificate of Child (for children with special problems only) | <input type="checkbox"/> |

PLEASE NOTE:

**Submission of this form does not guarantee admission.
Only shortlisted candidates will be called for an interaction.**

- I / We certify that the above information is correct and true to the best of my / our knowledge.
- I / We accept the Admission process undertaken by the school. I / We will abide by the decision taken by the school.
- I / We accept the Admission process undertaken by the school. I / We will abide agree to abide by the rules and regulations of the school.
- I / We accept the Admission process undertaken by the school. I / We will abide understand that the information above, if found incorrect, would automatically lead to cancellation of admission.

FOR OFFICE USE ONLY

Registration Receipt No. _____

Date of Interview/Interaction: _____

Admit to Class: _____ Academic Session: _____ Admission Incharge: _____

Transport allotted: _____ Route no. : _____ Pick up point: _____

Transport in charge: _____

Director Pre-School

Date: / /

Dean Academics

Date: / /