REGISTRATION FORM

(For Office Use Only)

1. Registration Number _________ Date _______
2. Class To Which Admission Is Sought _______
3. Date of Admission Test & Interview _______

To be filled in by Parents/Guardian

General Instructions:
1. All entries must be filled in precisely & neatly.
2. This form must be filled in by either of the parents in his/her own handwriting.
3. This form is only for registration of the child to appear in the admission test.
4. Parents must go through the mandatory school rules given along with the prospectus before filling this form.

- Student’s Name
- Mother’s Name
- Father’s Name
- Date of Birth
- Child’s age as on April 1, 2017
- Place of Birth
- Gender M ☐ F ☐
- Nationality
- Mother Tongue
- Co-curricular Activities: Sports
- Stage
- Any other interest
**Particulars of Parents/Guardian**

<table>
<thead>
<tr>
<th>S No</th>
<th>Relationship</th>
<th>Qualification</th>
<th>Occupation</th>
<th>Designation &amp; Place of work</th>
<th>Annual Income (Rs)</th>
<th>Phone No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Mother</td>
<td></td>
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<tr>
<td>2</td>
<td>Father</td>
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</tr>
<tr>
<td>3</td>
<td>Guardian</td>
<td></td>
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</tr>
</tbody>
</table>

**Details of real brother(s) sister(s) studying/studied in this school**

<table>
<thead>
<tr>
<th>S No</th>
<th>Name</th>
<th>Class &amp; Sec</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

**Previous Education**

<table>
<thead>
<tr>
<th>School Last Attended</th>
<th>Board</th>
<th>Medium of Instruction</th>
<th>Class last attended</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

**Reason for leaving last school:**

**Permanent Address**

- House No. __________________________________ Colony ____________________________
- Village/ Town _____________________________________________________________
- District_______________________________ State _______________________________
- Pin Code ____________________________
- Tel No ____________________________ Mobile ____________________________

**Correspondence Address**

- House No. __________________________________ Colony ____________________________
- Village/ Town _____________________________________________________________
- District_______________________________ State _______________________________
- Distance from the school (Km) _________
- Pin Code ____________________________
- Tel No ____________________________ Mobile ____________________________
- E-mail ____________________________
We hereby declare that the information given in this form is true to the best of our knowledge. We further acknowledge that the any false statement made by us in this form shall entail an automatic cancellation of our ward’s admission to the school.

Father’s Signature

Date

Mother’s Signature

Date

Guardian’s Signature

Date

DOCUMENTS TO BE DEPOSITED AT THE TIME OF ADMISSION

1. Date of Birth Certificate issued by the Registrar of Birth and Deaths, where –ever existing, as proof of date of birth (for classes Nursery & K G)

2. Transfer Certificate (T C)/ School Leaving Certificate (S L C) signed by the Head of the Institution last attended and countersigned by D E O if coming from some other board than the C B S E (for candidates from other schools)

3. Photocopy of Report Card (previous class)

4. Address Proof and ID Proof of the Parents.

5. Adhar Card of Student.

6. Recent passport size colour photographs of the child, mother & father/ guardian (two copies each)

7. Health card signed by registered physician.

Note:

I have read and acknowledge the school rules, further I recognized that it is my responsibility to abide by the rules.

Signature: ___________________     Date: ____________
## WRITTEN TEST

Date of Admission Test _____________________ Invigilator ________________

<table>
<thead>
<tr>
<th>S No</th>
<th>Subject</th>
<th>Max Marks</th>
<th>Marks Obtained</th>
<th>Marker</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
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<tr>
<td>2</td>
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<tr>
<td><strong>Total</strong></td>
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</tbody>
</table>

## PERSONALITY TEST

<table>
<thead>
<tr>
<th>S No</th>
<th>Aspect</th>
<th>Grade</th>
<th>Sig of Interviewer</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>General Awareness</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>Communication Skills (in English)</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Personal Hygiene</td>
<td></td>
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</tr>
</tbody>
</table>

Class Coordinator’s Remarks ______________________________________________________

Signature ___________________________ Date ________________________________

Principal’s Remarks ____________________________

Signature ___________________________ Date ________________________________