



Affix photograph

Registration Form for Admission

Name & Address of the School

Class

To be filled by Office
 Registration No.
 Admission No.
 Date :

Please use CAPITAL LETTERS	Name of the applicant <input type="text"/>				Last column to be filled by School office only (bracket portion indicates weightage points)	
	Date of Birth	DD <input type="text"/>	MM <input type="text"/>	YYYY <input type="text"/>		
	Father's Name <input type="text"/>					
	Mother's Name <input type="text"/>					
1.	Permanent Address	<input type="text"/>			1 (20)	
	Present Address	<input type="text"/>				
	Ph. No(s).	email <input type="text"/>				
2.	Sibling Real brother/sister only (Tick the appropriate)	Yes <input type="text"/>	No <input type="text"/>	2 (20)		
	If sibling in the same school, give details of sibling	Sibling Name <input type="text"/>	Class & Section <input type="text"/>			
3.	School Alumni (Tick the appropriate)	If Yes, year of passing			3 (5+5)	
	(a) Father	Yes <input type="text"/>	No <input type="text"/>			
	(b) Mother	Yes <input type="text"/>	No <input type="text"/>			
4.	Child with Special Needs (Enclose authenticated documents)	Yes <input type="text"/>	No <input type="text"/>	4 (5)		
5.	Educational Qualification (Tick highest qualification only)	Post Graduation OR Professional Degree	Graduation OR Equivalent	Sr. Secondary School Examination (10+2) OR Equivalent	Secondary School Examination (10th) OR Equivalent	5 (20)
	(a) Father	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	(b) Mother	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
6.	Gender	Boy <input type="text"/>	Girl <input type="text"/>	6 (5)		
7.	Parents Occupation	7 (10+10)				
	Father (For occupation code, see overleaf)	Occupation Code <input type="text"/>	tick, if Govt. servant <input type="text"/>			
		Designation <input type="text"/>	<input type="text"/>			
		Organisation Name <input type="text"/>	<input type="text"/>			
		Organisation Add. <input type="text"/>	<input type="text"/>			
	Mother (For occupation code, see overleaf)	Occupation Code <input type="text"/>	tick, if Govt. servant <input type="text"/>			
		Designation <input type="text"/>	<input type="text"/>			
		Organisation Name <input type="text"/>	<input type="text"/>			
		Organisation Add. <input type="text"/>	<input type="text"/>			
	Single Parent (Tick one, only if applicable)	Father <input type="text"/>	Mother <input type="text"/>	<input type="text"/>		
8.	Nationality <input type="text"/>	Religion <input type="text"/>				

General Instructions

1. Use only black ball pen to fill the form
2. Do not enter registration number yourself
3. Do not fill anything in the last column of the form
4. Use appropriate tick mark as [✓] in the relevant box given in the sections 2, 3, 4, 5, 6 and 7
5. Use the codes given below to fill in the section 1 (Locality Code) and section 7 (Occupation Code)

Occupation Code

Code	Occupation	Code	Occupation	Code	Occupation
ADV	Advocate	DOC	Doctor	NWS	Journalist/AIR/ Print Media
AWS	Airways	EDU	Educationist	MER	Merchant Navy
ARC	Architect	EMB	Embassy Employee	OTH	Others
DEF	Army/Navy/Air Force- Defence Services	FIN	Financial Organisation Employee	PVT	Private Sector Employee
BNK	Bank Employee	HTL	Hotel	PUB	Public Sector Employee
BUS	Business	CIV	Civil Services	RWS	Railway Employee
CAC	Chartered Accountant	INT	International Organisation	SCT	Scientist*

[To be filled up By students of Class-XI]

For Science Stream : Compulsory - English, Physics, Chemistry

Elective : [Tick Mark any two of the subjects opted] – (1) Biology; (2) Maths; (3) Economics; (4) Computer; (5) Hindi
(Combination is depend on the availability of seats only).

For Commerce Stream : Compulsory - English, Accountancy, Business Studies, Economics

Elective : [Tick Mark any one of the subjects opted] – (1) Maths; (2) Hindi.

Note : PHE will be given as sixth subject.

Residence Locality Code

Code	Distance Range – Locality
O	[0-3 km]
A	[Above 3 km upto 5 km]
B	[Above 5 km upto 8 km]
C	[Above 8 km upto 10 km]
D	[Above 10 km]

**List of Supporting Documents to be produced
by the Parents at the Time of Admission**

1. Date of Birth Certificate of the Child.
2. Medical Certificate of the Child (for Children with Special Needs).
3. Pass out Certificate of Father / Mother (School, Graduation, Postgraduation etc.).
4. Proof of Residence
5. Proof of Sibling (Wherever Applicable).
6. Proof of Alumni (Wherever Applicable).

CERTIFICATE FROM THE PARENTS

I/we hereby certify 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, the ward shall be automatically debarred from selection/admission process without any correspondence in this regard I/we also understand that the application/registration/short listing does not guarantee admission to my ward. I/we accept the process of admission undertaken by the school and I/we will abide by the decision taken by the school authorities.

- I hereby declare that the particulars given in respect of my son/daughter/ward are true to the best of my knowledge and I shall not request the authorities for any alteration in date of birth etc. given above.
- My ward will attend the class regularly and as per CBSE norms he/she will fulfill the criteria of attendance i.e. 75%.
- My ward will pass subjectly as well as aggregate in all the examinations held during the session.
- He or she, if found in any indisciplinary activity in the School his/her T. C. should be sent to my residence.

Signature of the mother _____

Signature of the father _____

Name of the mother _____

Name of the father _____

Date : _____

Date : _____

अभिभावक के कम्पनी कर्मचारी होने का प्रमाण

Certified that father/mother of Master/Miss _____ Class _____ is a regular employee of the _____ under area _____ and is entitled to fee payable at the rate chargeable from the wards of company employees.

Dy. P.M./Sr. P.O.
Sign with Seal

Dy. CME/SOM
Sign with Seal

Manager/Area Personnel Manager/Authorised Signatory
Sign with Seal

FOR OFFICE USE : ADMITTED TO

Class _____ Section _____ on _____ Scholar's Regn. No. _____

Clerk

Principal