



ADARSH PUBLIC SCHOOL

NYAY KHAND-2, INDIRAPURAM, GZB

Ph.0120-6441621, 6401621, 8130265292

Sr.No.....

ADMISSION FORM

Passport size
photograph of
the student

Admission for class:.....Session.....

1. (a) Name of the Child in full (in capital letters):

(b) Sex Male Female

2. Date of Birth Day Month Year

In words.....

Age till 31st March: Day Month Year

3. Blood Group of the child.....

4. Category.
Gen. SC ST OBC EWS Disabled SG Child

Detail of Mother/Father	Mother	Father
1. Name (in block letters)		
2. Nationality & Occupation		
3. Name of office & full address with Telephone No.		
4. Full residential address with tele no.		
5. Permanent Address		
6. Annual income in (Rs.)		

- Detail of parents:-
- Name & Address of local guardian (if any):.....
- Detail of last attended school:.....
- If, the last school was not affiliated with CBSE, specify name of the Board:.....
- (a) Result of last examination :..... (b) Percentage.....
- Subject proposed to offer: 1.....2.....3.....
4.....5.....6.....
- Whether the transfer certificate is attached YES/NO: Date of T.C.....
- Language Known:.....Home town.....

DECLARATION BY THE PARENTS

I hereby declare that the above information furnished by me is correct to the best of my knowledge & belief. I hereby abide by the rules of the Vidyalaya.

Date:.....

Signature of parents

NOTE: Please carry Aadhar Card of parent & a child too.

FOR THE PRINCIPAL USE ONLY

1. I certified that I have checked the application form and the relevant papers are found in order.

Admission Incharge

2. Please admit to class.....Section.....after checking the relevant papers and Realize the dues.

Date.....

PRINCIPAL

FOR THE OFFICE USE ONLY

Admitted to class.....Section.....Fee Receipt No.....

Dated.....issued.

Details of amount received:

Admission Fee Rs.....

Tution Fee Rs.....

Any other Fee Rs.....

Computer Rs.....

TOTAL	Rs.....
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The name has been entered in the Class Attendance Register () Yes () No

It is certified that all the entries have been made in the Scholar's Register and the dues have been received.

The registration No. of the student in Admission Withdrawal Register is.....Vol.....

Date:.....

Office Suptd.

Admission considered by the school is in accordance with the provisions of the Board & approved.

Date:.....

Signature of Principal/Official Sea