

• **Particulars of Parents/Guardian**

S No	Relationship	Qualification	Occupation	Designation & Place of work	Annual Income (Rs)	Phone No
1	Mother					
2	Father					
3	Guardian					

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

S No	Name	Class & Sec	Year

• **Previous Education**

School Last Attended	Board	Medium of Instruction	Class last attended	Result

• **Permanent Address**

House No. _____ Colony _____

Village / Town _____

District _____ State _____

Pin Code

Tel No Mobile

• **Correspondence Address**

House No. _____ Colony _____

Village / Town _____

District _____ State _____

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

Mother's Signature

Guardian's Signature

Date _____

Date _____

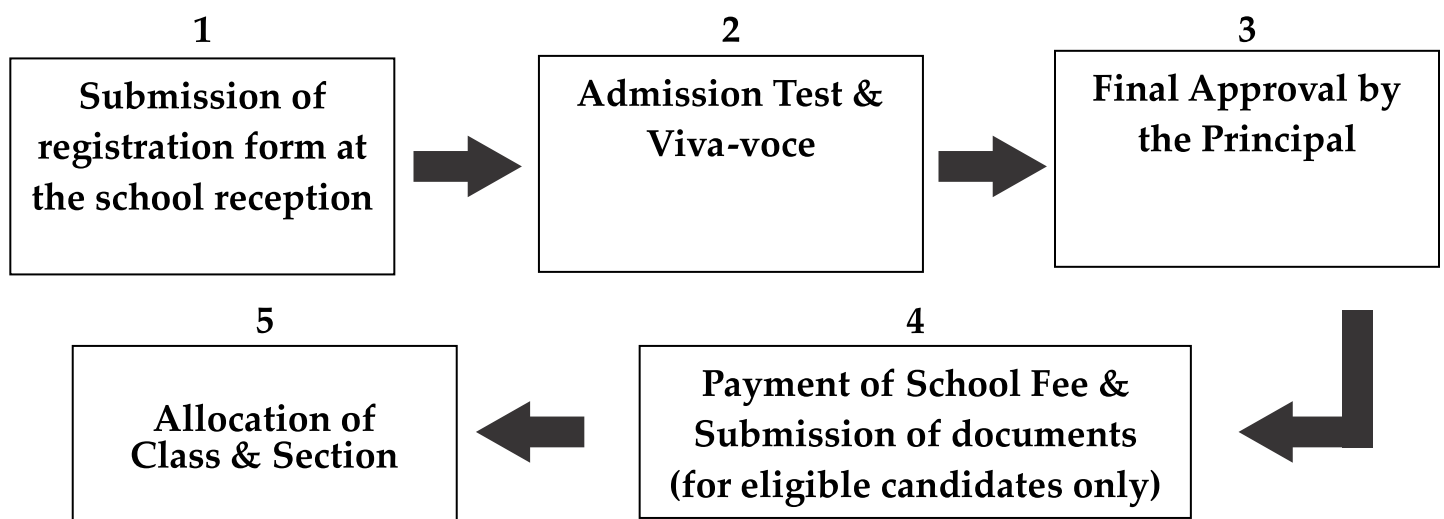
Date _____

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. Recent passport size colour photographs of the child, mother & father/ guardian (**two copies each**)
5. **Admission shall stand as provisional till the submission of documents.**

ADMISSION PROCEDURE

FLOW CHART



(FOR OFFICE USE ONLY)

WRITTEN TEST

Date of Admission Test _____ Invigilator _____

S No	Subject	Max Marks	Marks Obtained	Marker	Remarks
1					
2					
3					
	Total				

PERSONALITY TEST

S No	Aspect	Grade	Sig of Interviewer	Remarks
1	General Awareness			
2	Communication Skills (in English)			
3	Personal Hygiene			

Class Coordinator's Remarks _____

Signature _____ Date _____

Principal's Remarks _____

Signature _____ Date _____