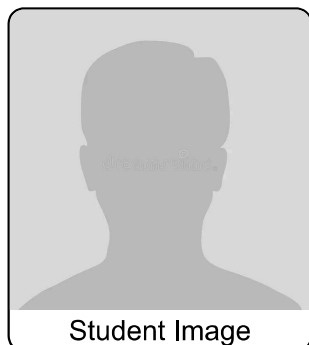


**undefined undefined undefined**

**ADMISSION FORM SESSION:-**

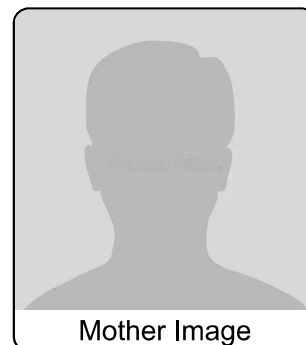
Admission No :-



Student Image



Father Image



Mother Image

Class :-  
Date of Birth :-  
Blood Group :-  
Aadhaar No. :-

Applicant's Name :-  
Gender :-  
Religion :-

**Residential Address**

House No. :-  
Area :-  
City :-  
Pincode :-  
E-mail :-

State :-  
Phone 1 :-  
Phone 2 :-  
Mobile :-

**Father's Particulars**

Name :-  
Qualification :-  
Occupation :-  
Income :-  
Aadhaar No. :-

**Mother's Particulars**

Name :-  
Qualification :-  
Occupation :-  
Income :-  
Aadhaar No. :-

**Father's Office Address**

Organization :-  
Address :-  
Area :-  
Mobile No. :-

Guardian's Name & Relationship :-

**Mother's Office Address**

Organization :-  
Address :-  
Area :-  
Mobile No. :-

**In case of School Alumni**

Father's Name & Batch :-  
Mother's Name & Batch :-

**In case of Sibling**

Name :-  
Father's Name :-  
ID :-

Whether SC / ST / Backward Class / OBC / Minority / General (If any enclose certificate) :-

Name of Previous school :-

Health Remark/Status :-

# UNDERTAKING

**I Undertake following:**

**I certify that I give my consent and am in a position to pay the prescribed fees and funds and will not ask for fee concession.**

**I will pay school fee of my ward regularly and will not ask for part payment.**

**I undertake that I will pay the school fee as per the time schedule given by the school.**

**I also know that brother/sister's fees concession, is not granted.**

**I have seen the fee structure shown to me at the time of admission. I know fee structure is subject to change as per norms.**

**I have read and checked the details given by me and understand if found incorrect at any stage would lead to cancellation of Admission of my ward.**

**I agree to abide by the rules and regulations of the school and will not involve myself in any anti school activity.**

**I also understand that I will not bring the mobile phone or any other electronic device inside the school premises while attending the PTM or for any other reason.**

I - father and - mother of - hereby declare that information given above is based on facts and authentic records. Admission of my child will be cancelled if any information is found to be false / incorrect.

Father's Name : \_\_\_\_\_

Mother's Name : \_\_\_\_\_

Signature : \_\_\_\_\_

Signature : \_\_\_\_\_

Date : \_\_\_\_\_

Date : \_\_\_\_\_

(PRINCIPAL)