

# GURU NANAK PUBLIC SCHOOL

WEST AVENUE PUNJABI BAGH, NEW DELHI- 110026  
Ph.: 45078265, 47012008

PHOTO  
OF  
STUDENT

## REGISTRATION FORM

No. \_\_\_\_\_ (For Office use only)  
Registration for Class \_\_\_\_\_

1 Name of the Student (In block letters) \_\_\_\_\_

2 Date of Birth 

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(In words) \_\_\_\_\_

3 Age as on 31st March' \_\_\_\_: 

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4 Sex : Male  Female

5 SC / ST : Yes  No

6 Student Aadhar Card no \_\_\_\_\_

7 Class for which admission is sought \_\_\_\_\_

8 Father's Name (In Block Letters) \_\_\_\_\_

Office Address \_\_\_\_\_

Designation : \_\_\_\_\_

Residential Address : \_\_\_\_\_

Off. Tel. : \_\_\_\_\_ Res. No. : \_\_\_\_\_ Mob. : \_\_\_\_\_

9 Mother's Name (In Block Letters) \_\_\_\_\_

Designation \_\_\_\_\_

Residential Address : \_\_\_\_\_

Office Address if any \_\_\_\_\_

10 Mobile No. : \_\_\_\_\_ Res. No. : \_\_\_\_\_ Tel. No. For SMS: \_\_\_\_\_

11 Is the School Transport required?  Yes  No

Medical Information : Does the child have some special needs :

If Yes, give details \_\_\_\_\_

12 Information of parameters adopted by the school :

- a) Religious / Linguistic Minority\_\_\_\_\_
- b) Economically weaker section (Weightage as per school criteria)\_\_\_\_\_
- c) Socially Disadvantaged section\_\_\_\_\_

d) Sibling (Real Brother / sister only) in the same school

[Tick the appropriate]

Yes

No

Sibling Name\_\_\_\_\_

Class-Section\_\_\_\_\_

e) School Alumni

[Tick the appropriate, if yes, year of passing]

Father

Yes

No

Mother

Yes

No

f) If the Child is physically challenged

Yes

No

g) Are you in a transferable job

Yes

No

h) Are you a Single parent

Yes

No

Please register my son/daughter named above in your school. I shall produce the requisite documents at the time of admission :

Signature of the Parent

**Undertaking**

I \_\_\_\_\_ father/mother of \_\_\_\_\_

hereby declare that information given above by me is based on facts and authentic records.

Admission of my child may be cancelled if any information is found to be false.

Signature of the Father

Signature of the Mother

Date .....

## **Documents Required at the time of Registration:-**

**Please submit attested photocopies of -**

- **Birth Certificate of the child**
- **Aadhar card of the child**
- **Aadhar Card of Father & Mother.**
- **Proof of the Residence.**
- **ID Proof of Parents.**
- **Medical Fitness Certificate from registered Medical Practitioner.**
- **Blood Group of the child with Immunization Card.**
- **Passing Certificate of Parents who are alumni of the school.**
- **Report Card/Identity Card of elder child in the school.**
- **Divorce Decree or Death certificate of spouse for Single Parents.**
- **Latest Passport size photograph to be pasted on the Registration Form.**

## **Documents required at the time of Admission:-**

- **Three passport size photographs of the child and one each of the Parent.**
- **Please bring Original documents for verification (at the time of Admission).**