



# D.A.V. PUBLIC SCHOOL

UDAIPUR

Managed by : D.A.V. College Managing Committee, Chitra Gupta Road,

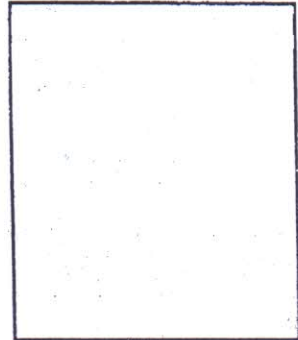
New Delhi - 110 055

(To be affiliated with Central Board of Secondary Education, New Delhi)

## REGISTRATION CUM - ADMISSION FORM

### APPLICATION FOR ADMISSION TO CLASS \_\_\_\_\_

1. Class in which admission sought \_\_\_\_\_ year \_\_\_\_\_
2. Stream Selected (Arts/Commerce/Science) \_\_\_\_\_
3. Name of the ward \_\_\_\_\_  
(In Block Letters)
4. Date of Birth \_\_\_\_\_  
(In figures) (In words)
5. Place of Birth \_\_\_\_\_
6. Mother's Name \_\_\_\_\_
7. Father's/Guardian's Name \_\_\_\_\_
8. Occupation :  
If in Service Rank/Designation : \_\_\_\_\_  
Department : \_\_\_\_\_  
If in business : Nature of Business : \_\_\_\_\_  
Address of Business premises : \_\_\_\_\_
9. Monthly Income of father/guardian \_\_\_\_\_
10. Academic Qualification of (a) Father \_\_\_\_\_  
(b) Mother \_\_\_\_\_
11. Nationality \_\_\_\_\_
12. Religion \_\_\_\_\_
13. Postal Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_
14. Whether any real brother/sister is studying in this School ? If so, please mention  
Name \_\_\_\_\_
15. Name of the school presently attending \_\_\_\_\_
16. School previously attended :



Name of the School Class	Class	From Year	To Year

17. Medium of instruction in the last school \_\_\_\_\_
18. Whether a member of SC/ST/OBC \_\_\_\_\_
19. Official Address of Father/Guardian \_\_\_\_\_  
Telephone No. \_\_\_\_\_
20. Any particular weakness/disability of the child, the school should take note of, \_\_\_\_\_

#### Declaration by the Parent/Guardian :

I agree to abide by the rules and regulations of the school applicable from time to time. I also accept that the decision of the school authorities with regard to disciplinary/academic and administrative matters, is final and binding.

Date \_\_\_\_\_

Signature of the Father/Guardian

Signature of Principal