



PRATIBHA PUBLIC SCHOOL

(UNDER ARYABHATTA EDUCATIONAL & SOCIAL ENHANCEMENT TRUST)

Affiliated to CBSE, New Delhi

Sant Colony, S.D.O. Court, P.O.: BMP-7, Dist.: Katihar, Pin:- 854106 (COURT COMPOUND, MIRCHAIBARI, KATIHAR)

PH. : 06452-230571, Mob.: 9934444857 (Office) 8051581394, 8789896189

Affiliation No. - 330788

Administrative Office : Near North Bihar Gramin Bank, Mirchaibari, Katihar

Admn. No. _____

ADMISSION FORM

Reg. No. : _____

[Write in Capital Letters]

I/We and
desire to have my / our son / daughter / ward whose particulars age given below
admitted as a day scholar / border in your School.

Passport
Size
Photograph

1. Student's Name
2. Mother's Name Occupation
3. Father's Name Occupation

4. Date of Birth 5. Date of Birth in words 6. Religion
- _____

7. Admitted in class 8. Nationality 9. SC/ST/OBC
- _____

10. RESIDENTIAL ADDRESS

Tel./Mob. : _____

11. CORRESPONDENCE ADDRESS

Tel./Mob. : _____

12. Previous School;s detail : _____

13. Annual Income of (a) Father
- (b) Mother

Passport
Size
Photograph

(For Class XI/XII only)

14.	Previous Schools Name	Board Roll No.	Markas/Grade	Percentage	Passing Year
	_____	_____	_____	_____	_____

15. Subjects (i) (ii) (iii)
- (iv) (v) (vi)

SIGNATURES :

I hereby certify that the information given in the Admission form is complete and accurate. I understand and agree the misrepresentation or omission of facts will justify the denial of admission, the cancellation of admission or expulsion. I has read and do hereby consent to the Terms and Conditions being enclosed with the form.

Signature of Fater/Guardian **Signature of Mother/Guardian**

ENCLOSURES

- Health Certificate
- Birth/Transfer Certificate
- Previous Marks Sheet/Grade Card
- Blood Group _____

Principal

Sibling Detail :-

NAME	RELATION	CLASS	ROLL	SCHOOL

Whether the student will avail Conveyance Facility :- Yes No

If Yes then :- Destination Area : _____

Permanent Address

Temporary Address

<input type="text"/>	Address	<input type="text"/>
<input type="text"/>	Area	<input type="text"/>
<input type="text"/>	City	<input type="text"/>
<input type="text"/>	State	<input type="text"/>
<input type="text"/>	Pin	<input type="text"/>
<input type="text"/>	Mobile	<input type="text"/>

Declaration

To the best of my knowledge the above information is complete and accurate. I have read and understood the rules and regulations of the school and promise to abide by them.

Student's Name _____ Parent's / Guardian's Name _____

Parent's / Guardian's Signature : _____

Place : _____ Date :- _____

For Office Use only

Admitted to Class : School Roll No. Alloted : Date of joining:

Checklist of Document Submitted :-

- | | |
|--|---|
| 1. Completed Admission Form <input type="checkbox"/> | 2. Birth Certificate <input type="checkbox"/> |
| 3. Colour Passport size Photograph - 2 <input type="checkbox"/> | 4. Colour family Photo - 1 <input type="checkbox"/> |
| 5. Photocopy of :- Driving Licence <input type="checkbox"/> V. I. Card <input type="checkbox"/> PAN Card <input type="checkbox"/> Ration Card <input type="checkbox"/> | |

Remark :-

Signature of the Admission Officer

Signature of the Principal

Acknowledgment

Name of the Student :- _____

Father's Name: _____

Admission Sought to Class : _____ Date of Admission : _____

Authority Signature