



BAL BHARTIS PUBLIC SCHOOL

(C.B.S.E. Course)

Phone No.: 98641-22512

ADMISSION FORM

Admission No :.....

*Please affix a recent
colour photograph
of the child*

Write in Capital letters

We _____ and _____ desire

To have our son / daughter / ward admitted as a scholar in your school :

INFORMATION OF CHILD

Last Name

First Name

Date of Birth

Date of Birth (in words)

Blood Group

Class for which Admission is sought

Nationality

SC / ST

RESIDENTIAL ADDRESS

ADDRESS FOR CORRESPONDENCE

Emergency Contact Telephone Number

FAMILY INFORMATION

FATHER :

Name :	Institution :
Educational Qualification :	Office Address :
Organisation working for :	
Designation :	Tel :

MOTHER :

Name :	Institution :
Educational Qualification :	Office Address :
Organisation working for :	
Designation :	Tel :

SCHOOL :

Previous school attended, if any _____ Last Class attended, if any _____ (Recognised / not recognised) We hereby submit the School Transfer Certificate

PROOF OF AGE :

We solemnly declare that the Date of birth of the child given above is as per Birth Certificate which is produced for verification. A certified copy is also enclosed.
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TESTIMONIALS REQUIRED :

(i) Last School Report Card To be produced during interview. (ii) Photostat Copy Birth Certificate. (iii) 2 Passport sized photographs.
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IF REQUIRED :

(i) Transport facility	:	Yes	or	No
(ii) Hostel facility	:	Yes	or	No

SIGNATURE :

I hereby certificate that the information given in the Admission Form is complete and accurate. I understand and agree that misrepresentation of facts will justify the denial of admission, or cancellation of admission, or expulsion.	
<i>Signature of Father / Guardian</i>	<i>Signature of Mother / Guardian</i>

:: FOR SCHOOL USE ONLY ::

1. Check List :	Admitted to :
2. Transfer Certificate (<i>Original</i>) :	Class :
3. Birth Certificate (<i>Photocopy</i>) :	Section :
4. Transformation Form :	
Office Superintendent _____	Principal's Signature : _____
Date : _____	Date : _____

(One application form is applicable per child)