



Affiliation No: 3430257

REGISTRATION FORM FOR THE SESSION 2025 - 2026

School Code: 66451

Registration No :

Registration For Class :

Ledger Name :

Receipt No :

Date : / /

Admission Form No :

Registration Fee :

LOCAL TOWN :

PARENT'S PHONE NO :

STUDENT'S PARTICULARS

Name of the Student :

Previous Class :

Date Of Birth : / /

Age :

Gender : Male / Female

Address :

Student Type : DS / DB / R

Physically Challenged : Y / N

Nationality :

Religion :

Caste :

Aadhar No :

Student's Signature : _____

PARENT'S PARTICULARS

Name Of Father :

Contact No :

Full Address :

Mail id :

Aadhar No :

Father's Signature : _____

Name Of Mother :

Contact No :

Full Address :

Mail id :

Aadhar No :

Mother's Signature : _____

GUARDIAN'S PARTICULARS

Name of Guardian 1 :

Contact No :

Full Address :

Aadhar No :

Mail id :

Relationship :

Guardian's Signature : _____

Name of Guardian 2 :

Contact No :

Full Address :

Aadhar No :

Mail id :

Relationship :

Guardian's Signature : _____

INSTRUCTIONS:

- 4 Copies of PP size Photo of Student, Father, Mother & Guardian
- Xerox Copy of Aadhar Card of all.
- Data of Birth Proof, Medical Certificate, Transfer Certificate.