

Date..... Rec. No..... Amount..... Reg. No.....

# D.A.V. CENTENARY PUBLIC SCHOOL

(UNDER D.A.V COLLEGE TRUST & MANAGEMENT SOCIETY, NEW DELHI)



Indri Road, Karnal

Affiliated to C.B.S.E. New Delhi (Code No 530711)

## ADMISSION FORM

Passport Size Photograph

May I request that my child, whose particulars are given below, be registered for admission to  
Class..... For the Session.....

1 Candidates name in Capital Letters (Leave a box blank to indicate diifferent parts of the name)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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2 Sex (Male/Female).....

3 D.O.B.    

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    In Words.....  
Date                  Month                  Year

Proof attached : Yes/No.....      Age on 01/04/20 : .....

4 Particulars of Parents :

Father's Name.....    Mother's Name.....

Qualification.....    Qualification.....

Occupation.....    Occupation.....

Designation.....    Designation.....

Office Address.....    Office Address.....

5 Home Address.....

6 Telephone No.....(O).....( R ) Cell No.....

E-mail : .....

7 Last School Attended :

| Recognised<br>By Board | Class Passed/<br>Studying | % in this<br>Class | Medium of<br>Instruction | Date of Admission | Date of Withdwal | Reason for Leaving |
|------------------------|---------------------------|--------------------|--------------------------|-------------------|------------------|--------------------|
|                        |                           |                    |                          |                   |                  |                    |

8 Subject offered : .....

9 Details of brothers and sister :

| Name   | Age   | Class | School |
|--------|-------|-------|--------|
| 1..... | ..... | ..... | .....  |
| 2..... | ..... | ..... | .....  |
| 3..... | ..... | ..... | .....  |

10 Student's Interest : (Games / Hobbi) 1.....2.....3.....

11 Relations who can visit the school :

| Name   | Relationship | Signature | Name   | Relationship | Signature |
|--------|--------------|-----------|--------|--------------|-----------|
| 1..... | .....        | .....     | 2..... | .....        | .....     |
| 3..... | .....        | .....     | 4..... | .....        | .....     |

12 Where the School Transport is required : Yes/No..... **13 Blood Group of Student**.....

14 Any Special information about the child (Health, food, habits & allergies etc.).....

I know that registration fee is Non-Refundable and that registration is no Guarantee for Admission.  
I certify that my child will abide by the rules and regulations of the school and that the decision of  
the Principal, in all school matters, will be final and binding on us.

### VERIFICATION

Verified that the statement made and information furnished by me in the above registration form are true and correct to the best of my knowledge has been concealed there of and in case any information deemed is found found to be incorrect or wrong then the admission if arready made shall be automatically deemed to be rejected/cancelled.

Signature (Parents / Guardians

Signature (Principal)