

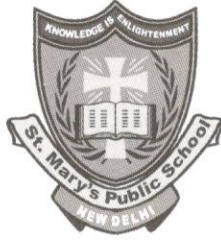
ST. MARY'S PUBLIC SCHOOL

530, Bandh Road, Devli, New Delhi - 110080

Phone: 9891339988, 7838913115

E-mail: stmarydevlischool@gmail.com

FAMILY PHOTO



PHOTOGRAPH
OF STUDENT

Form No.

REGISTRATION FORM (TO BE FILLED IN BLOCK LETTERS)

Registration for

1.	Name of Student:			
2.	Date of Birth:			
		Date	Month	Year
	Date of Birth in words:			
3.	Gender	Male / Female	Aadhar No.:	
4.	Father's Name:			
	Qualification:			
	Profession / Designation:			
	Office Address:			
	Residential Address:			
	Tel. No. (Residence)			
	Mobile No.:			
5.	Mother's Name:			
	Qualification:			
	Profession / Designation:			
	Office Address:			
	Residential Address:			
	Tel. No. (Residence)			
	Mobile No.:			

6.	Do you belong to minority community?	Yes / No	
	If yes, please specify which one		
7.	Does the child have any special needs?	Yes / No	
	If yes, give details		
8.	(a) Any sibling studying in this school? Please reply only with reference to own sister or Brother. Yes / No		
	(b) If yes, please give following details of the sibling		
	Name: _____		
	Class & Section: _____		
	Admn. No.: _____		
9.	School Alumni (a) Father Yes / No (b) Mother Yes / No (If Yes, attach any proof)		
10.	Has he / she attended any other school? Yes / No		
	If yes, Name of the school with class		
Signature			

UNDERTAKING

I,father / mother / guardian ofhereby declare the information given above by me is correct. Admission of my child may be cancelled if any information is found to be false.

Signature of the Mother

Signature of the Father

Date: .