# 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?**<br>**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 of .....hereby 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

Date:

Signature of the Father