

ST. MARY'S PUBLIC SCHOOL

530, Bandh Road, Devli, New Delhi - 110080

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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	<input type="text"/>
	(b) Mother	Yes / No	<input type="text"/>
	(If Yes, attach any proof)		
10.	Has he / she attended any other school?	Yes / No	<input type="text"/>
	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: