



REGISTRATION FORM (2024-25)

Form No.:PRO/24-25/W....

BANASTHALI PUBLIC SCHOOL

G-BLOCK, VIKAS PURI, NEW DELHI -18, Phone No.:011-28543824

Website: www.banasthalipublicschool.com

Affix
Coloured
Photograph
of
MOTHER

Affix
Coloured
Photograph
of
FATHER

Affix
Coloured
Photograph
of
GUARDIAN
(If Applicable)

Affix
Coloured
Photograph
of
CHILD

KINDLY FILL THE FORM IN BLOCK LETTERS ONLY, ALL FIELDS ARE MANDATORY

Seeking Admission in Class _____

Date:/...../202.....

Student's Full Name: Aadhar No.:

Date of Birth*: [] [] / [] [] / [] [] [] [] (DD/MM/YYYY)

Age as on 31st March 2024: [] [] Years [] [] Month(s) [] [] Days(s)

Category (Gen./SC/ST/OBC) *:, Nationality:, Gender (M/F/T):

Religion (Hindu/Muslim/Sikh/Christian/Jain/Parsi/Buddhist):, Minority (Yes/No) *:

PARTICULARS	FATHER	MOTHER
Name		
Academic Qualification		
Occupation & Designation		
Annual Income		
Office Address		
Mobile No.		
Email Id		
Aadhar No.		

Present Address*:

Name of the School last Attended:, Prev. Class:

Address of the last School:

Marks Obtained in Prev. Class (Out of:.....): E....., H....., M....., SCI., SSC., SKT./ 3rd Lang.:

School Transport Facility Required: YES NO, Bus Stop (If Yes):

Mention Disease (Epilepsy/Diabetic/Asthmatic/Any Other) / Allergy (if any) child is suffering from:

Is child PWD (Person with Disability) (Yes/No)*:, Is Adopted Child* (Y/N):

Are you a single Parent? If Yes (Tick the appropriate): Father Mother

Name and Class of the Real Brother / Sister studying in any School*:

1) Name: Class: School:

***SELF- ATTESTED PHOTOCOPIES OF THE FOLLOWING DOCUMENTS ARE REQUIRED:**

S. No.	PARTICULARS	CHECKLIST FOR PARENT <input checked="" type="checkbox"/>	FOR OFFICE USE
1.	Birth Certificate issued by MCD/Competent Authority		
2.	Residence Proof ([Ration Card/Smart Card issued in the name of parent having name of the child])/ Domicile Certificate of child or of his/her parent /Voter I-Card (EPIC) of any of the parent/ Electricity Bill/MTNL Telephone Bill/ Water Bill/Passport /Aadhar Card/ UID Card/]in the name of any of the parent		
3.	Aadhar Card of Child		
4.	Aadhar Card of Father		
5.	Aadhar Card of Mother		
6.	Aadhar Card of Guardian (if applicable)		
7.	Report Card of Previous Session		
8.	School Medical Certificate (Attested by competent authority only)		
9.	Caste Certificate of SC/ST/OBC (if applicable)		
10.	Certificate of PWD (Person with Disability) (if applicable)		
11.	Proof of Sibling: Photocopy of School ID / Fee Receipt (if applicable)		
12.	Proof of any of the Parent being School Alumni (if applicable)		

Please register my ward named above for admission in your school. I shall produce the requisite documents in original at the time of admission.

DECLARATION

I (Father/ Mother/ Guardian) of Mst./Ms. hereby declare that the information given above by me is based on facts and authentic records. In case, any of the information is found false or incorrect, the registration may be cancelled and school authorities are at liberty to take any action as deemed fit.

.....
Father

.....
Mother

.....
Legal Guardian

(FOR OFFICE USE ONLY)

Regn. No.: PRO/RN/24-25/.....

Form Received on:/...../202...

Form Received By:

REMARK (If Any):

Observed the Child Personally (Yes/No):, Adm. In-Charge Sign.:

Date:/...../202...