



GLOBAL PUBLIC SCHOOL

Jharana, Madhorajpura Tehsil, Phagi 303006

ADMISSION FORM

Sr. No: _____

Class in which admission is sought for: _____

Session: _____

1. a. Full name of the Child (in capital letters) _____

b. Aadhar Card No.: _____

c. Sex: Male Female Other

2. Date of Birth: Day Month Year

In words: _____

Age of the student as on 31st March: Year Month Day

3. Blood Group of the child: _____

4. Do you belong to Gen./SC/ST/OBC/EWS/Disabled/S.G. Child category attach certificate if applicable:

Gen. Cat. SC ST OBC EWS Disabled SG Child

5. Details of parent-

Details	Father	Mother
1. Aadhar No.		
2. Name (capital letter)		
3. Nationality		
4. Occupation		
5. Name of the office & full address with telephone no		
6. Full residential address		
7. Contact No		
8. Permanent Address		
9. Annual Income		

6. Name & Address of local guardian (if any): Name: _____

Address: _____

7. Name & Address of the previous school with Class: Name: _____

Address: _____

8. No. and date of T.C. issued by previous school with status of result: No.: _____

Date of TC issued: _____ Result Status: _____

9. Whether previous school was affiliated with CBSE: (Yes / No) _____

10. If, the previous school was not affiliated with CBSE, specify name of the Board _____

11. a. Result of previous examination: _____ b. Percentage: _____

12. Subjects proposed to offer: 1 _____ 2 _____ 3 _____

4 _____ 5 _____ 6 _____

13. Whether the transfer certificate is attached: YES/NO

14. Mother tongue: _____ Home town: _____

DECLARATION BY THE PARENT

I hereby declare that the above information furnished by me is correct to the best of my knowledge & belief, if any information or document supplied by me found to be incorrect, I will be responsible for the same. I shall abide by the rules of the school.

Date: _____

Signature of Parent: _____