	TIONAL SCHOOL
(K) Na	MRITSAR
Registration Form	(Session 20 20) with Date
S. No.	
(All the entries sho	uld be in capital letters only)
Name of the Student	
Last Name :	
Date of Birth (In Figures): (D) (Age as on April 01, 20) (D) (D) (In Words) : (D)	D) (M M) (Y E A R) Sex (M/F): Years Months Days
Aadhaar Card No. of the Child	
Information Ab	out Parents/ Local Guardian
Father's Details	Mother's Details
Name :	Name :
Academic Qualifications:	Academic Qualifications:
Occupation:	Occupation:
Residential Address :	Residential Address :
	<u> </u>
Pin:	Pin:
Mobile No :	Mobile No :
E-mail :	E-mail :
Are you school Alumnus? Yes/ No	Are you school Alumnus? Yes/ No
If Yes- Year of Passing	If Yes- Year of Passing
Class Passed	Class Passed
Relation with the Child	Relation with the Child
(In case of Guardian)	(In case of Guardian)
Name of the school and class last attended :	
Nationality Religion	Mother Tongue
Category : General SC SC	ST OBC Staff Ward
Details of siblings (real brother or sister) studying	
Name of the Child Adm	ission. No. Class/Sec.
Any health problem of the child (allergic, asthmatic	ato) :
(Attach Medical Proof)	
List of Sup	porting documents

- Self attested photocopy of child's Birth Certificate issued by Municipal Corporation.
- Salf attacted photosopy of child's Andhorr Card
- Self attested photocopy of child's Aadhaar Card.
- Two passport size photographs of the child.
- Passport size photographs of the parents (One each of Mother & Father).
- Self attested photocopy of parents ID proof i.e Aadhaar/Pan/Voter Card (One each Mother & Father).

DECLARATION

- 1. We, hereby, declare that the information given in this registration form is correct & valid
- 2. Registration does not mean admission and registration fee is not refundable.

gnature of Father
Regd. No.

Admission In-charge_____

Principal