



Brahmlin Swami Amar Dev Ji Memorial
PANCHTIRTHI SR. SEC. PUBLIC SCHOOL (PPS)

Affiliated to CBSE , New Delhi
Kalanaur (Rohtak)

ADMISSION FORM

Photo
With
Date

S. No

Admission No. To be filled by office.

CLASS to which admission sought : Session :

PERSONAL DETAILS:-

1. Name :

2. Gender : Male Female Any other

3. D.O.B : Date Month Year

In Words

4. Details of Parents:-

Details	Mother	Father / Guardian
Name		
Educational Qualification		
Residential Address		
E-mail		
Occupation		
Official Address		
Annual Income		

5. Whether the candidate is :-

(i) Single Girl Child : Yes No

(ii) Specially abled (Divyangjan) Yes No

(iii) Belonging to the EWS Yes No

(Attach Proof wherever applicable)

6. Category : (Attach Proof) : General SC ST OBC EWS

7. Adhar No. (Not Mandatory) (Attach Proof)

8. Name & Address of the last attended school.....

9. Class Last attended

10. Last school affiliated is

- (i) CBSE (ii) ISCE (iii) IB
(iv) State Board (v) Any Other(Please specify).....

11. Result of Last Class:

Subject	Maximum Marks	Marks obtained	% of Marks	Remarks

12. Transfer Certificate Details* :-

Transfer Certificate No :-.....

Date of issue:-

13. Details of siblings(if any)

	Brother/sister	Age	School studying in
Name			

DECLARATION

I hereby declare that the above information including Name of the candidate, Father's /Guardian's Name, Mother's name and date of birth furnished by me is correct to the best of my knowledge & belief. I shall abide by the rules of the school.

Date.....

Signature of the parents(s)/Guardian

Place.....

Relation with candidate

Correct entries from the Admission Forms to Admission and withdrawal Register have been made on Page no..... on dated.....

Signature of the Principal

- In case, student is from other board, Transfer certificate should be countersigned by the Competent Authority.

Central Board of Secondary Education