

DASHMESH PUBLIC SCHOOL

Vasundhra Enclave, Delhi-110096 Unaided Minority School Ph: 20822004, 20822005, 20822006, 45873902 Email: <u>dashmeshpublicschool.ve@gmail.com</u> Website: www.dashmeshschools.com

Slip No.

REGISTRATION FORM FOR UKG TO IX (2024-25)

Please read the following instructions carefully before filling up the Registration Form:

- 1. Fill the form in **<u>BLOCK LETTERS</u>** only.
- 2. Use only Blue pen to fill the form.

| | Please affix | Please affix | Please affix |
|-------------------|--|--|------------------------|
| | Latest | Latest | Latest |
| | Photograph | Photograph | Photograph |
| | (Child) | (Mother) | (Father) |
| | (enno) | (interior) | |
| | | | |
| | | | |
| 1 N | ame of the Studen | t | Class |
| | | | |
| 2 1 | Date of Birth: | | |
| | | | |
| 2 | go of the student | (as on 31 st march 2024) Yea | ars Months |
| J <i>F</i> | age of the student | | INOILLIS |
| | | | |
| 4 G | ender Male | Female Minority | Yes No |
| | | | |
| | | | |
| 5 | Caste Categories (| GEN/ST/SC/OBC/OTHER) | Aadhaar No.: |
| | | | |
| 5 6 | Caste Categories (Parent Informa | | Aadhaar No.: Mother |
| | | | |
| | Parent Informa Name: | | |
| | Parent Informa | | |
| | Parent Informa Name: Qualification: | | |
| | Parent Informa Name: Qualification: Occupation: | | |
| | Parent Informa Name: Qualification: | | |
| | Parent Informa Name: Qualification: Occupation: Designation: | ation: Father | |
| | Parent Informa Name: Qualification: Occupation: Designation: Organisation N | ation: Father | |
| | Parent Informa Name: Qualification: Occupation: Designation: Organisation Na & Address: | ation: Father | |
| | Parent Informa Name: Qualification: Occupation: Designation: Organisation N | ation: Father | |
| | Parent Informa Name: Qualification: Occupation: Designation: Organisation Na & Address: Email ID: | ation: Father | |
| | Parent Informa Name: Qualification: Occupation: Designation: Organisation Na & Address: | ation: Father | |

7 Residential Address & Phone No:

8 Medical Information:

Blood Group: Allergies to Medicine & Food:

Birth History Complication/History of Major illness, If any

9 Previous School Information:

Name of the School_____

Class Attended____% of Marks

10 Sibling Studying in the School:

Name: Class & Sec

UNDERTAKING FROM PARENTS

We hereby certify that the above information provided by us is correct and we understand and accept that if information is found to be incorrect or false, our ward shall be automatically debarred from selection / admission process without any correspondence in this regard. We also understand that the application for registration / short listing does not guarantee admission to my ward. We accept the process of admission undertaken by school and we abide by the decision taken by the school authorities.

Signature of Father

Signature of Mother

Documents to be submitted (Self Attested Photocopies) at the time of registration:

- 1. Proof of Residential Address: Any of the following:
 - Ration Card.
 - Voter I-Card (EPIC) of any of the parents.
 - Electricity bill/MTNL telephone bill/Water bill/Passport in the name of any of the parents or child.
- 2. Aadhar Card of Child, Mother & Father.
- 3. Passport size photograph (Three each of Child, Mother & Father).
- 4. Immunisation Card and Medical fitness certificate issued by MBBS doctor. (For UKG to II)
- 5. Transfer certificate & Marksheet of previous attended school. (Mandatory for I IX)
- 6. Sibling's proof: I-Card/Fee Receipt (If applicable)
- 7. Affidavit of single parent along with death certificate/divorce certificate. (If applicable)
- 8. Date of Birth Certificate issued by MCD.

Note: Original documents to be produced at the time of admission.