


Student Admission Form

	School Name: _____ School Code: _____ U-DISE Code: _____ Status: _____ School Admission Number: _____ Admission Date: / / Session: _____ Type of Admission: New / Re-admission/ Transition	Form No: _____ Date: _____	Please paste passport size (35 mm (w) x 44 mm (H)) colored photograph with white background here. Photo should not exceed borders. Do NOT staple.
	If re-Admission, Old Admission No: _____ Unique SRN (Student Registration Number) generated by MIS: _____ Enrollment No if allotted by Board: _____		
	# Please read the following instructions carefully before filling Admission Form.		
	1. Use CAPITAL letters only. 2. Tick (e.g. <input checked="" type="checkbox"/>) wherever applicable and strike-off (e.g. Male / Female) whichever not applicable. 3. Fields marked with * are mandatory.		
	Students/Parents shall fill in the form from section '1. Student Information' onwards		
1. Student Information			
Class of Admission: _____		Stream(for 11 th /12 th): Arts/Commerce/Science	
Name* (as on Aadhaar): _____		Mr/Miss/Mrs _____	
Date of Birth*: / /		Gender*: Male/Female	
Aadhaar No: _____		EID No (if Aadhaar is not available): _____	
Place of Birth*	Country*: _____	State*: _____	
	District*: _____	Tehsil*: _____	City/Village*: _____
Email ID: _____		Mobile No: _____	
Nationality*: _____			
2. Parent/Guardian Information			
Father's Name (as on Aadhaar)*: _____			
Father's Aadhaar No: _____		Mobile No*: _____	
Father's Occupation*:		Agriculture (Farmer)/ Laborer/ Self Employed/ Private Job/ Haryana State Govt. Employee/ Other State Govt. Employee/ Central Govt. Employee/ Military Personnel/ Para-military Personnel/ PSU Employee	
Office Address of Father (if working):			
Father's Highest Education Qualification:		Illiterate / Schooling / 10 Pass / 10+2 Pass / Certificate Holder / Diploma Holder / Bachelor's Degree Holder / Master's Degree Holder / Doctor's Degree Holder	
Father's PAN: _____		Income Tax Payee: Yes/No Email ID: _____	
Mother's Name (as on Aadhaar)*: _____			
Mother's Aadhaar No: _____		Mobile No*: _____	
Mother's Occupation*:		House Wife/Agriculture (Farmer)/ Laborer/ Self Employed/ Private Job/ Haryana State Govt. Employee/ Other State Govt. Employee/ Central Govt. Employee/ Military Personnel/ Para-military Personnel/ PSU Employee	
Office Address of Mother (if working):			
Mother's Highest Education Qualification:		Illiterate / Schooling / 10 Pass / 10+2 Pass / Certificate Holder / Diploma Holder / Bachelor's Degree Holder / Master's Degree Holder / Doctor's Degree Holder	
Mother's PAN: _____		Income Tax Payee: Yes/No Email ID: _____	
Whether, Parents engaged in 'Unclean Occupation'?		Yes / No	
Parents Annual Income* (in Rs.): _____			
Student belongs to 'Below Poverty Line' (BPL) family*?		Yes / No	
If 'Yes':	BPL Certificate No: _____	Issuing Authority: _____	Issued Date: / /
3. Information of Siblings studying in this School (mandatory if student has sibling, mention details of siblings)			
1 st Sibling's Full Name: _____		Class: _____	
Student Registration Number of Sibling (SRN): _____		Relation: _____	
2 nd Sibling's Full Name: _____		Class: _____	
Student Registration Number of Sibling (SRN): _____		Relation: _____	
4. Student's Address Information			
Correspondence Address*: _____		Distance from School (KMs)*: _____	

City/Village/Town*:		Tehsil*:	Block:	
Area of living	Rural / Urban			
District*:		State*:		PIN*:

Landline Number:	STD:		Phone:	
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Is 'Permanent Address' same as Correspondence Address?* **Yes/No** (If No, fill in Permanent Address details below)

Permanent Address*:	
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City/Village/Town*:		Tehsil*:	Block:	
Area of living	Rural / Urban			
District*:		State*:		PIN*:

5. Reservation Information

Religion*:	Hindu/ Muslim/ Christian/ Jain/ Sikhs/ Parsi/ Buddhist			
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Category*:	General / SC / SBC / BC-A / BC-B / ST	Caste (if Reserved Category) :		
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If Reserved Category :	Certificate No:	Issuing Authority:	Issued Date: / /
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Physically Handicapped? Yes/No (If yes, type)	<input type="checkbox"/> Blindness	<input type="checkbox"/> Low-vision	<input type="checkbox"/> Hearing Disability	<input type="checkbox"/> Speech Disability	<input type="checkbox"/> Loco motor Disability
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Percentage (%)→					
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Mentally Challenged? Yes/No (If yes, type)	<input type="checkbox"/> Mental Retardation	<input type="checkbox"/> Learning Disability	<input type="checkbox"/> Cerebral Palsy	<input type="checkbox"/> Autism
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Percentage (%)→				
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Genetic Disorder:	<input type="checkbox"/> Color Blindness / <input type="checkbox"/> Haemophilia / <input type="checkbox"/> Deletion syndrome / <input type="checkbox"/> Angelman syndrome / <input type="checkbox"/> Canavan disease / <input type="checkbox"/> Charcot-Marie-Tooth disease / <input type="checkbox"/> Cri du chat / <input type="checkbox"/> Cystic fibrosis / <input type="checkbox"/> Down syndrome / <input type="checkbox"/> Duchenne muscular dystrophy / <input type="checkbox"/> Haemochromatosis / <input type="checkbox"/> Klinefelter syndrome / <input type="checkbox"/> Neurofibromatosis / <input type="checkbox"/> Phenylketonuria / <input type="checkbox"/> Polycystic kidney disease / <input type="checkbox"/> Prader-Willi syndrome / <input type="checkbox"/> Sickle-cell disease / <input type="checkbox"/> Tay-Sachs disease / <input type="checkbox"/> Turner syndrome				
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6. Medium of Instruction*: **Hindi / English**

Compulsory & Optional Subjects taken for class being admitted (for classes VI to XII only)

Compulsory Subjects:

a.	b.	c.	d.
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Optional Subjects:

e.	f.	g.	h.
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7. Past School Information: (Applicable to students who already have Student Registration No and getting Re-Admitted in this school)

Student Registration Number (SRN, if available):	
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Name of Previous School:		School code:	
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Last class attended:		Date of leaving: / /	% Marks/Grade Obtained:
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8. Student's Bank Account Information (Mandatory if student already has a bank account)

Account Holder Name / Joint Account Holder Name (if any):

Relation of Joint account holder with student: Mother / Father / Brother / Sister / Grand-Father / Grand-Mother / Aunt / Uncle

A/c No:		IFSC Code:	
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Bank Name:		Branch Name & Code:	
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9. Other Information

Student's Hobbies:	
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Student's Past Achievements (SPAT/Sports/Scholarships):	
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10. Declaration by Parent/Guardian*

I hereby declare that all the information given here is true. I take full responsibility of my child to behave sincerely. We will abide by all the rules and regulation of the institution. Please admit my child in class _____.

Place:		Signatures of the Parent/Guardian
Date:		

11. Attached Documents and Certificates Section:

1.	2.
3.	4.
5.	6.

For Office Use Only

Permission granted to admit in class:	
PRINCIPAL	ADMN.IN CHARGE
Signatures of Head of Institution (with Full name and Seal)	

Note: Parents/Student may retain photocopy of completely filled in admission form for future reference.