APPLICATION FORM FOR ADMISSION TO CLASS NUR To IX, SESSION- 2026-27

FOR OFFICE USE ONLY

Registration No -	DOA - _ _ / _ _ / _ _ _ _	Admission No -	Class -

ALL DETAILS TO BE FILLED IN BLOCK LETTERS ONLY

Name of the Student -

Father's Name -

Mother's Name -

DOB of the Student - [ ][ ] / [ ][ ] / [ ][ ][ ][ ]
Date   Month   Year

Differently abled - [ ] Yes [ ] No   **Religion -**

Gender -   **Blood Group -**

Category- [ ] GEN [ ] OBC [ ] SC [ ] ST [ ] EWS

Aadhaar No -

PEN No -

APAAR No -

UDISE No -

Visible Identification Marks -

Email ID -

WhatsApp Number -

Student's Photo

Student's Sign in English

Student's Sign in Hindi

DETAILS OF LAST SCHOOL ATTENDED (IF ANY)

Name of the school -

Medium -

Marks obtained in Final Examination (%) -

Class Last Studied -

T. C / S. L. C. No -

Date - ☐☐ / ☐☐ / ☐☐☐☐

Place -

Permanent address

Landmark -

P. S -   Distt -   PIN Code - ☐☐☐☐☐☐

Present address

Landmark -

P. S -   Distt -   PIN Code - ☐☐☐☐☐☐

Mode of Transportation: ☐ School Bus   ☐ Self   ☐ Other

Whether the candidate is a: ☐ Hostler   ☐ Day Scholar

Areas in which you could contribute to enrich school life in terms of time & skills etc. please tick:

☐ Dance ☐ Indoor ☐ Media ☐ Music ☐ Outdoor ☐ Social Skills ☐ Painting

☐ Athletics ☐ Speaking Skill

Declaration :

I have gone through the prospectus and accept and agree to abide by the rules and regulations of the school. I, hereby, declare that all the information given above is true and correct.

Signature of Student   Signature of Father / Mother / Guardian

Date: ....   Date: ....

Father's Details -

Aadhaar No -

Occupation -

Mobile No -

Annual Income -

Qualification -

Father's
Photo

Father's Sign in English

Mother's Details -

Aadhaar No -

Occupation -

Mobile No -

Annual Income -

Qualification -

Mother's
Photo

Mother's Sign in English

Guardian's Name (If parents not alive)-

Relationship with Student -

Aadhaar No -

Occupation -

Mobile No -

Annual Income -

Qualification -

Guardian's
Photo

Guardian's Sign in English

DETAIL OF SIBLINGS:

a. Name of the Student:

b. Class & Institute: