



ARWACHIN BHARTI BHAWAN SENIOR SECONDARY SCHOOL

VIVEK VIHAR, DELHI - 110095 TEL. : 22141630, 22151630

Photograph
of Student

REGISTRATION FORM

Class.....

Date.....

1. a. Name of the Pupil (in block letters)

b. Date of Birth (in figures)

Date

Month

Year

(in words).....

2. a. Parent's Name: Father..... Mother.....

b. Full residential address (in block letters).....

Telephone No. (residence)..... (Office).....

c. Professional/Designation Father..... Mother.....

d. Monthly Income: Father..... Mother.....

e. Office Address: Father..... Mother.....

f. General Education: Father..... Mother.....

3. Category: GEN SC ST OBC Physically Handicapped Others

Tick or applicable. Please attach certificate from concerned Deptt. of Government of NCT of Delhi, if you belong to SC/ST, OBC and Physical Handicapped etc. duly attested by Gazetted Officer.

4. Religion: Hindi Musim Sikh Christian Bodh Jain Others

5. School Alumni: Father Mother

6. a. Number of brothers & sisters and the position of the child amongst them.....

b. Name and Class with Section of brothers/sisters studying in this school
1..... 2.....

c. Real brothers/sisters studying in any other school.....

7. a. Do you have own house or rented house (with year)

Own Rented Year

8. In Case Your child is admitted, what mode of conveyance would you like to use for her/his coming to school

School bus Taxi Car Auto Bicycle on Foot

9. Are you in a joint family Yes No

10. In case both are working, who looks after the child at home till the mother or father comes back

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11. Is your child an INTROVERT EXTROVERT AMBIVERT

12.a What kind of toys does your ward like to play with

b. What kind of games does your ward like to play

13. Does she/he play alone or with friends Alone With friends

14. Is your child afraid of a situation such as

a. Sleeping Alone Yes No

b. Darkness Yes No

c. Any animal Yes No

15. Is she/ he gripped with fright easily Yes No

16. Has she / he a problem of Bedwetting Yes No

17. Was the Birth of the child Normal Premature

Date.....

Signature : Mother.....

Father.....

UNDERTAKING

I

Father/Mother of.....

hereby declare that information given above by me is based on facts and authentic records.

Admission of my child may be cancelled if any information is found to be false.

Date

Signature of Father/Mother.....

NOTES

- (1) 3 years for Pre School & 4 years for Pre Primary on 31st March.
- (2) Incomplete application will not be entertained.
- (3) Registration does not mean reservation of seat.
- (4) Parents are requested to submit complete application form along with attested copy of original Date of Birth Certificate issued by M.C.D. / Municipal / B.D.O.
- (5) Three passport size photos of student with name and address at the back of the photo alongwith one photo each of father and mother.
- (6) School conveyance available only on existing routes.