

ADMISSION FORM / प्रवेश-प्रपत्र

20..... - 20.....

Vidya Bharti Akhil Bhartiya Shiksha Sansthan
Run By : Samarth Shiksha Samiti (Reg.) Delhi

Photo

Name of School/विद्यालय का नाम

Student Admission No. Class in which admission sought Stream Aadhar No.

A. Student's Detail :

Name : First Middle Last

Date of Birth Date Month Year (In Words".....)

Category* General SC ST OBC Religion Sex

Admission Date Month Year Distance from School KM

Student Type Physically Handicap Medical Allergy Blood Group

Mother tongue of the child

Medium of Instruction (English/Hindi/Sanskrit)

Previous School

Correspondence Address

Mob. No. City State Pin

B. Real Brother/Sister info. (Studying in same institution)

(1)Name Age Institution Class/Section/Roll No.

(2)Name Age Institution Class/Section/Roll No.

C. Father's Details : Aadhar Number of the father

Name : First Middle Last Nationality

D. Bank Details :

Name Account Number

Occupation Organization Designation

Office Address

City State Pin

Education Income (PA)Rs.

Resi. Address

City State Pin

Mobile Phone E-mail

E. Mother's Details :

Aadhar Number of the mother

Name : First

Middle

Last

Nationality

Occupation

Organization

Designation

Office Address

City

State

Pin

Education

Income (PA)Rs.

Resi. Address

City

State

Pin

Mobile

Phone

E-mail

F. Guardian Details (other than father)

Name : First

Middle

Last

Occupation

Organization

Designation

Office Address

Mob. No.

City

State

Pin

Education

Income(PA)Rs.

Resi. Address

City

State

Pin

Mobile

Phone

E-mail

G. Family Details :

Family Income (PA) Rs.

Number of Children

G. Additional Information :

Do you want to use School Transport ?

If yes mention Stop

Instruction :-

✦ I am my ward agree all rules and regulations of the school and will be bound with them.

✦ All information given in the admission form are true in my best knowledge. If any information is false/wrong. my ward admission may be cancelled.

Student's Signature

Parent's Signature

Provisional Admission till

due to Non-receipt of

1.

2.

3.

Student's Signature

Parent's Signature

Admission Incharge

Principal

for Office use only:

Admission granted to

S/o, D/o

in Class

Section

Stream

Admission Incharge

Principal

Accounts Department

Fee Rs. deposited for class Section

Security Amount Rs.Receipt No. Dated

Tick where needed (a) Sc./Arts/Comm. (b) with maths / Comp. Sc. © bus form(Stop).

Dealing Clerk

For Class Teacher

Sr. Admn. No.

Name

Class..... Section.....

Subject (if Class XI/XII).....

Dealing Clerk