



M. M. Public School

VASUDHA ENCLAVE, PITAM PURA, DELHI-110034
Application Form for Registration/Admission to

Class

Tell us about the child

Please affix
passport size
photograph
of child

- 1.1 Name : _____
- 1.2 (i) Date of Birth in figures : _____
Day Month Year
- (ii) Date of Birth in words: _____
- 1.3 Residential Address: _____

- Landline No. : _____ Mobile No.: _____
- 1.4 Permanent Address: _____

- Landline No. : _____ Mobile No.: _____
- 1.5 Sex: Male/Female : 1.6 First Child : (Yes/No,if Yes, attach proof thereof) 1.7 Blood Group: _____
- 1.8 Mother Tongue: _____ 1.9 Last School Attended: _____
- 1.10 Last Class attended : _____ if Class X, then
(i) Board appeared : _____
(ii) Roll No. of Class X : _____ (iii) Year of Passing : _____
- 1.11 Interest in Sports / other Activities / Hobbies (if any) : _____

- 1.12 Nationality : _____ Religion : _____
- 1.13 Whether SC/ST/OBC Yes/No (If yes, attach proof thereof)
- 1.14 Whether School Transport is required, if yes, from where : _____

- 1.15 Any Disability / Medical Problem (Attach Proof) : _____
- 1.16 Aadhar Card No : _____

Tell us about Yourself (Parents)

2.1 Who takes care of the child : Parents / Guardian

[A] In case, parents:

FATHER

Please affix
passport size
photograph
of Father

MOTHER

Please affix
passport size
photograph
of Mother

- (a) Name : _____
- (b) Age : _____ Years
- (c) Educational Qualification : _____
- (d) Profession / Occupation: Pvt. / Govt.
- (e) Designation : _____
- (f) E-mail id : _____
- (g) Name of Organisation / Deptt. : _____

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- (c) Educational Qualification : _____
- (d) Profession / Occupation: Pvt. / Govt
- (e) Designation: _____
- (f) E-mail id : _____
- (g) Name of Organisation / Deptt. : _____

(h) Official Address : _____ (h) Official Address : _____

 Phone Numbers : _____ Phone Numbers : _____
 (i) If in business, Nature of Business : _____ (i) If in business, Nature of Business: _____

 (j) Monthly Income: ₹. _____ (j) Monthly Income: ₹. _____
 (k) School Alumni _____ Year of Passing : _____ (k) School Alumni _____ Year of Passing : _____
 (Attach proof) (Attach proof)

(B) In case of Guardian:

a) Name: _____
 b) Address : _____
 c) Mobile No. : _____ E-mail id: _____
 d) Age : _____ Years
 e) Relation with Parents: _____
 f) Any other Information: _____

Please affix
 passport size
 photograph
 of guardian

MISCELLANEOUS INFORMATION

3.1 Whether the family is joint : _____ Yes / No
 3.2 No. of real brother(s) & sister(s) : _____

Name	Age	Sex	Class	School/Col./Service/Orgn.
(1) _____	_____	_____	_____	_____
(2) _____	_____	_____	_____	_____

3.3 We want our child to be admitted in this school because:

3.4 We came to know about your school from:

3.5 Documents attached in support of date of birth: _____

(If Third Person)
 Please affix
 passport
 size
 photograph

3.6 Who will come to pick the child from the school in case school transport is not used?
 i) Parent(s) / guardian(s) _____
 ii) Third person _____

DECLARATION BY PARENTS

- i) Certified that the information supplied by me is correct.
- ii) I have gone through the website / prospectus & agree to abide by the rules & regulations of the school.
- iii) No refund will be made after the confirmation of admission.

Date :

Signature of Parents/Guradian

FOR OFFICE USE ONLY

Registration No. _____
 Admission No. : _____
 Admitted in Class: _____
 Ad. Receipt No. : _____

Admission Incharge

Cashier

Principal



REGISTRATION SLIP

Registration No. : _____ Dated _____
 Registered _____ for
 Admission to Class _____

For