

(NEW ADMISSION REGISTRATION FROM)

NEW LOOK CENTRAL SCHOOL, BHILWARA

KOTA ROAD (Sr. SECONDARY)



S. No.

Date:

1. Name of the student (in capital letters)

2. Sex: Male Female

3. Date of Birth (DD:MM:YYYY)

(Photocopy of Date of Birth Certificate Issued By Municipal Corporation Must be attached with this form / Transfer Certificate (original))

4. Contact No. Father Res.

Mother SMS

5. Occupation : Self – Employed Service None

Family Background:

Family Member	Name	Educational Qualifications	Designation Name & Address of Company	Monthly Income
Father				
Mother				
Guardian (If Any)				

6. Class for Which applied: _____

7. Name of the Previous School : _____

Class : _____

8. Date of interview: _____

Note : 1. Last date for submission of the Registration Form is _____ this Form will not be entertained after last date.

2. Incomplete Form will not be accepted.

Signature of Parents / Local guardian

FOR OFFICE USE ONLY

REMARK OF PRINCIPAL / IN-CHARGE: _____

Admitted / Rejected

In-Charge

PRINCIPAL

NEW LOOK CENTRAL SCHOOL, BHILWARA
KOTA ROAD (Sr. SECONDARY)



**** FOR OFFICE USE ONLY ****

- 1. Date of application: (DD/MM/YY)
- Session: -
- 2. Registration Number:
- 3. House Allotted
- 4. Class for which admission in sought

A Fix
Passport
size
Photograph

5. Name of the student (in capital letters)

6. Sex: Male Female

7. Date of Birth (DD:MM:YY)

(Date of Birth Certificate Issued By Municipal Corporation Must be attached with this form / Transfer Certificate (original))

8. Category: General *SC *ST *OBC *Minority

(*Attached Photocopy)

9. Aadhar Card No.

10. (a) Father's name :

(b) Mother's name:

11. Correspondence address:

Dist. PIN:

12. Permanent address:

Dist. PIN:

13. Is the child is single and girl: YES NO
If Yes provide affidavit for the same.

14. Bus Required: YES NO If Yes BUS NO.

1. बस सुविधा लेने पर पूरे सत्र की फीस जमा करवानी होगी।
 2. घर से बस स्टॉप तथा स्टॉप से घर लाने ले जाने का सम्पूर्ण उत्तरदायित्व अभिभावक का होगा।
 3. विद्यालय का प्रत्येक विद्यार्थी बीमा द्वारा इन्शोर्ड है।
 4. विद्यार्थी के विद्यालय समय के (एक घण्टा पश्चात) घर न पहुँचने की स्थिति में दूरभाष सं. 257180, 257181 पर सम्पर्क करें।
 5. यदि बस सम्बन्धी कोई शिकायत हो तो प्राचार्य से पत्र द्वारा सूचित करें।
 6. स्वयं के एवं प्राइवेट वाहन से विद्यार्थी को भेजने का पूर्ण उत्तरदायित्व स्वयं अभिभावकों का होगा। विद्यालय का कोई उत्तरदायित्व नहीं होगा।
 7. अगर अभिभावक बस स्टेण्ड को बदले तो उसकी लिखित सूचना पूर्व में दें।
 8. अभिभावक द्वारा सत्र के मध्य में मकान परिवर्तन पर बस सुविधा जहाँ तक उपलब्ध हो वहीं तक उनको सुविधा मिल पायेगी, अर्थात् सत्र के मध्य में बस का रूट नहीं बदला जायेगा।
 9. विद्यार्थी को बस द्वारा भेजने की समस्त जवाबदारी एवं पूर्ण उत्तरदायित्व अभिभावक का रहेगा। (यह विद्यालय द्वारा प्रदत्त सुविधा है।)
- मैंने सभी निर्देशों का अध्ययन कर लिया है और उनका पूर्णतया पालन करूंगा।

Nomination of Visitors

I hereby nominate the under mentioned persons to visit my ward and take him out of school premises as per rules of the institution. Their particulars duly attested by me are given below:

1. Name in full _____
Relationship with the student _____
2. Name in full _____
Relationship with the student _____

Self Declaration By Parents / Guardian:

The information given by me in this form and enclosures is true, I am solely responsible for its accuracy. I am aware that it is an offence to furnish any false information with a view of obtaining Admission in **NEW LOOK CENTRAL SCHOOL, BHILWARA**

Signature of Parents / Local guardian

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Documents to be submitted at the time of admission

1. PHOTOCOPY OF BIRTH CERTIFICATE
2. ORIGINAL TRANSFER CERTIFICATE ATTESTED BY THE DEPARTEMENT.
3. TWO PASSPORT SIZE PHOTOGRAPHS.
4. FORM MUST COMPLETED ACCORDING TO TRANSFER CERTIFICATE OR BIRTH CERTIFICATE
5. PHOTOCOPY OF AADHAR CARD OF MOTHER & CHILD.

The candidate is admitted provisionally to class _____

Office Receipt no

Date:

Secretary/Manager