

FOR OFFICE USE ONLY

Class _____ Adm. No. _____ Receipt No. _____ Date of Joining _____



D.A.V. CENTENARY PUBLIC SCHOOL

ISA CERTIFIED
DELHI ROAD, ROHTAK - 124001 (HARYANA)
PHONE : 70820-60555



ADMISSION FORM

- Name of the Student _____
- Date of Birth (in fig.) _____ 3. Place of Birth _____
(in words) _____
(photostat copy of the birth certificate to be attached).
- Mother tongue of the child _____
- * Father's Name _____
* Father's Designation _____
* Father's Edu. Qualification _____
- * Mother's Name _____
* Mother's Designation _____
- Present Postal Address of the Parent/Guardian _____

- Telephone Nos. (Office) _____ (Resi.) _____ E-mail _____
- Name of the school last attended and medium _____

- Whether the school is recognised/affiliated or not : _____
- Name of the Board (if affiliated) _____
- Previous class passed _____ (attach photocopy of report card).
- Class in which admission is sought _____
- Particulars of the real brothers/sisters studying in this school, if any :
a) Name _____
b) Adm. No. _____ c) Class & Section _____
- Whether the school transport is required or not : _____
- Who will teach child at home ? : _____
- Is child suffering from any chronic disease (give details) _____
- Category (SC/ST/BC/General) _____

Affix a
Passport
Size
Photograph
of
child

Affix a
Passport
Size
Photograph
of
Father

Affix a
Passport
Size
Photograph
of
Mother

I have read the prospectus of **D.A.V. Centenary Public School, Rohtak** and I undertake to make payment of the fees in advance and all sundry expenses and abide by the rules and regulations as laid down in prospectus or any change made later on. I shall give one month notice of withdrawal of my ward/ or withdrawal of transport or shall pay one month's fee in lieu of the notice.

Note :- For school transport fill in the Transport Registration Form.

Date :

(Signature of the Parent/Guardian)

Aadhar Card No. of the Student

(PRINCIPAL)
DAV Public School, Rohtak