

TO BE FILLED BY THE OFFICE

Test / Interview on _____ at _____



D.A.V. CENTENARY PUBLIC SCHOOL

DELHI ROAD, ROHTAK-124001 (HARYANA)

PHONE : 70820-60555

REGISTRATION FORM

Regn. No _____

Registration for Admission to Class _____

1. Name of the Student _____

2. Date of Birth (in fig.) _____

(in words) _____

(Photocopy of the Birth Certificate to be attached).

3. Name of Father _____ Occupation & Qualification _____

4. Name of Mother _____ Occupation & Qualification _____

5. Category : SC / ST OBC/BC General

6. Aadhar Card No. of the Student : _____

7. Residential Address _____

_____ Tel. No. (if any) _____

8. Present School (with address) _____

9. Present class _____

10. Whether affiliated or non-affiliated (Name of the Board) _____

I certify that I am in a position to pay the prescribed fees & funds and will not ask for fee concession.

(Sign. of the Parent / Guardian)

Note :

1. School Leaving Certificate from the previous school will be required, if selected for admission. In case the child is coming from a recognised school.
2. An original copy of the Birth Certificate from the Municipal Corporation / Municipal Committee will be required in support of Date of Birth of the student in case of admission to Pre-Primary.
3. A student will be tested and considered only for the class for which she/he is registered.

FOR SCHOOL OFFICE USE

Receipt No. _____

Sign. of Accounts Clerk