ST. MARK'S SENIOR SECONDARY PUBLIC SCHOOL MEERA BAGH, NEW DELHI - 110087

Regn No									
(For office	u	lS	e	0	n	l	¥.)	

REGISTRATION FORM (for Gen.Category) FOR ADMISSION IN PRE-SCHOOL (NURSERY) (Session 2021-22) (TO BE FILLED IN BLOCK LETTERS USING BLACK/BLUE PEN)

1.	Name of the student:						
2.	Gender Male	Female Transgen	der	Affix latest			
3.	Date of Birth: Date	Year	passport-size photograph of				
	Date of Birth (in words)			the student here			
				(Do not staple)			
4.	· ·	Years Months	Days	,			
	,						
5.	Details about Parents / Gr	ıardian					
	Affix latest	Affix latest	Affix lates	t			
	Passport size	Passport size	Passport siz	ze			
	photo	photo of	photo of				
	of father	mother	guardian,				
	(Do not staple)	(Do not staple)	if applicable				
			(Do not stapl	e)			
	(Father)	(Mother)	(Guardian	·			
a.							
			1				
	Is this area falling in scho	of bus route? Yes No	Check school we	bsite for details)			
	Tele No	Mobile Nos					
	E Mail Id						
b.	Father's Name						
		fferent from above)					
	Pin Code						
	Is this area falling in school bus route? Yes No (Check school website for details)						
	Tele No	Mobile Nos	-				
	E Mail Id						
	Signature of Father	Signature of Mother	Sign.of Guardian				

c.	Guardian's Name (if applicable)	Guardian's Name (if applicable)						
	Residential Address							
	Pin Code							
	Tele NoMobile Nos.							
	E Mail Id							
6.	Details of sibling(s) studying in this school: (Real brother/sister)							
	<u> </u>	Admission No.	Class & Section					
	run name P	tunission ivo.	Class & Section					
7.	Are the parents alumni of this school?							
	Father - YES NO Yea	r of passing out						
	Mother - YES NO Yea	r of passing out						
	Mother's maiden name							
3.	Is the child a ward of a staff member of the ins	Is the child a ward of a staff member of the institution? YES NO						
	If yes, please specify name of the staff member & relationship with child							
9.	Is your child suffering from any disability? If y	Is your child suffering from any disability? If yes, please specify the type of						
	disability and attach relevant documents.							
10.	. Any other relevant information you would like	to share						
	······							
	Signature of Father Signature of Mother	Sign.of Gua	rdian (if applicable)					
Г	Date							

UNDERTAKING

1,		, Parent/Guardian of,
do h	ereby declare that inform	nation given above is based on facts and authentic records,
and	I fully understand t	hat registration/admission of my ward will not be
cons	idered/will be cancelled	if any of the above mentioned information is found to be
incoı	rrect or not supported wi	th authentic proof. I also agree to produce all the required
origi	inal documents at the tim	e of admission failing which admission will not be granted
to m	y ward.	
I am	enclosing the following s	supporting documents:
(a)		
(b)		
(c)		
(d)		
(e)		
(Signature of Father	Signature of Mother Sign.of Guardian (if applicable)
D	ate	
		GENERAL INSTRUCTIONS
[A]	The form should be fille	ed by the Parent/Guardian in his/her own handwriting.
[B]	Please enclose attested	photocopies of the following documents:-
	1) Date of Birth Certific	cate of the child
	2) Proof of Residence:	* Aadhar Card/UID Card issued in the name of any of the parents
		* Voter-ID Card (EPIC) of any of the parents
		* Electricity Bill/MTNL Telephone Bill/ Water Bill / Passport in the name of any of the parents or child
		* Ration Card / Smart Card issued in the name of parents (Mother/Father having name of child)
		* Domicile Certificate of child or of his/her parents
	3) Proof of Sibling :	Photocopy of I-Card
	4) Proof of Alumni :	Photocopy of Class X & XII Passing Certificates
	5) Proof of disability of	f child (if applicable)
	, ,	ian and not the parent, also enclose the following:- ent assigning you the guardianship of the child.

[C] Transport facility will be provided by the school only on existing routes.

b) An affidavit as an evidence