| THE BAPT | | | | | SCF | IOOL | | | | | |
|---|-------------|---------------|--|---|------------------------------|--------------------|--|-------------------------------|--|--|--|
| Desistration Form | IPEXIE | INSION, EAS | ST DELHI-1100 | | | | | | | | |
| Registration Form (PLEASE USE CAPITAL LETTERS ONLY WHERE BOX IS PROVIDED, MARK YOUR CHOICES WITH TICK INCOMPLETE FORM WILL NOT BE ACCEPTED.) | | | | | Reg No Date of Submission | | | | | | |
| | | | | | | | | CLASS Authorised Signatory | | | |
| | | | | | | | | | | | |
| | | | | | PERSONAL DATA OF STUDEN | IT | | | | | |
| FULL NAME OF THE STUDENT | | (i.e.t.) | | | | | | | | | |
| (As it should appear in Official | | ficate) | | | | | | | | | |
| Date of Birth | | | | | | ENT PASSPORT- | | | | | |
| (As per the birth certificate issued by M.C.D) | | | | | | SIZE PHOTOGRAPH OF | | | | | |
| In Words | | | | | | STUDENT TO BE | | | | | |
| Age as on 31 st March 2025 | Year | Months | Days | | ۳ ۱ | PASTED HERE | | | | | |
| | | | | | | | | | | | |
| Nationality | Religion | N | lotherTongue | •••••• | | | | | | | |
| Previous School | | last Acad | omic Rosult | | • • | T/OBC/GEN) | | | | | |
| | | Last Atau | enne Kesutt | • | •••••• | | | | | | |
| Residential / Correspondence | Address | | | | | | | | | | |
| Telephone No./Mobile No Aadhar Card of the child PermanentAddress | | | | | | | | | | | |
| Approximate Distance of resid SIBLINGS INFORMATION (not o | | ne School 0-5 | KM 🗌 5-8 KM |] 8-10 KM | Mo | re than 10KM [| | | | | |
| Name of Brothers / | Age | Class | Name of the School If in L.P.S Admission | | | | | | | | |
| Sisters | | | No. | | | No. | | | | | |
| | | | | | | | | | | | |
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| | | | | | | | | | | | |
| | | | | | L | | | | | | |
| HEALTH | or montally | ahallangad) | | | | | | | | | |
| (a) Is your child physically If yes, please attach su | - | - | | Ye | | No | | | | | |
| | | | | | Г | | | | | | |
| (b) Does your child have a lf yes, please give deta | | | | Ye | S | No | | | | | |
| (c) School Alumni | | | | Ye | s | No | | | | | |
| Father | | | | | | | | | | | |
| Mother | | | | Ye | s | No | | | | | |
| | | | | | | | | | | | |
| Received the registration form | | ACKNOWLEI | | | | | | | | | |
| In respect of Master/Miss | | | | | | | | | | | |
| | | | | | | | | | | | |
| For Registration to class | | UI THE SCHO | or for the acader | IIIC SESSION | | | | | | | |

| Received | on. |
|------------|---------|
| neccrited. | · · · · |

..... Time..... PARENT'S INFORMATION Please affix recent passport photograph of Mother, Father and Child (Family Photograph) Father's Name...... Father's Qualification: Profession (In Detail): Profession (In Detail): Aadhar card number: Father's Annual Income Mother's Annual Income Are you single parent Yes No Relation to the child Parents Guardian SCHOOL TRANSPORT Yes Is the School transport required? No <u>CERTIFICATE REQUIRED at the time of registration (Attested):</u> (Without which the application of admission will not be accepted) a. Birth Certificate b. Medical Certificate (for children with special needs) c. Proof of Residence d. SDM's Certificate (for scheduled castes/ Scheduled Tribes/ other Backward community and Income Certificate) e. Transfer Certificate for class II onwards f. Alumni Proof g. Aadhaar Card Please note: Staple all documents to the top hand corner of the application. All documents are compulsory. Undertaking I, hereby declare that I am a bonafide Parent / Guardian of the student and to the best of my knowledge, information furnished above is correct. I will abide by the school rules and a procedure in all respects. Admission of my child is cancelled if any information is found to be false. Date: Signature of Father Signature of Mother **Guardian's Signature**

Note:

- 1. Filling of this form doesn't establish any claim for admission of the child.
- 2. Kindly produce this registration slip at the time of registration.