DR. RAM CHANDRA VIDYA PEETH PUBLIC SR. SEC. SCHOOL

Madanheri Distt. Hisar
(Affiliated to C.B.S.E. Delhi)

School Code No. 20941 Affiliation No. 531320

PHOTO OF STUDENT'S FATHER

PHOTO OF STUDENT'S MOTHER

PHOTO OF STUDENT

ADMISSION FORM FOR STUDENT

NAME OF THE STUDENT _____ SEX (MALE/ FEMALE)

AADHAAR NO. OF THE STUDENT _____

CATEGORY _____ DATE OF BIRTH _____
(GEN\SC\ST\BC\HC\OT)

FATHER'S NAME _____ QUAL _____

MOTHER'S NAME _____ QUAL _____

GRAND FATHER'S NAME _____

PERMANENT ADDRESS _____ PHONE (R) STD Code

_____ PHONE (O) STD Code

NATIONALITY_____ RELIGION_____

Certified that the information given above is correct & true to the best of my knowledge and belief.

Date..... Signature of Parent/Guardian

Note : 1. Application Should be supported by :- Birth Certificate issued by M.C./C.C. or School Leaving Certificate of recognized/affiliated school (with counter sign) and aadhar card.
2. Age Limit for L.K.G. + 3 Yrs.

UNDER TAKING BY THE PARENT/GUARDIAN

I_____ W/o, S/o Sh._____ Father/Mother/Guardian of_____ do here by affirm, declare and undertake as under :-

(i) That the date of birth of my child as stated by me in the admission form is correct in accordance with the Birth & death registration office record at City/Village_____ which is true and non changeable hereafter.
(ii) I undertake to deposit the School fee as per the schedule of the school.
(iii) That the School authorities are in no way responsible for any loss (physical or otherwise) caused to my child in School/ Playgrounds/Tours etc.

Signature of Parent/Guardian

FOR OFFICE USE ONLY

ADMISSION NO._____ DATE OF ADMISSION_____

CLASS_____

PRINCIPAL

RCVP SR.SEC.SCHOOL HISAR