

## NIRJA SAHAY DAV PUBLIC SCHOOL

Goshala Complex, Kanke, Ranchi - 06

Managed by DAV College Managing Committee, New Delhi- 55

Registration Form for Admission

РНОТО

	eipt No. :	Class			e filled by Of Registration Admission Da	No.		
	Name of the applicant							200
FILL IN BLOCK LETTERS	Date of Birth as on 31st March	DD	MM		YYYY			
	In word:		11.10.200.000					
8000	Aadhaar No. :							
Z I	Father's Name							
Œ	Mother's Name							
1.	Permanent Address						Loca	lity Code
	Present Address						-	Locality Code erleaf)
	Ph. No(s) : Email :							
2.	Sibling Real brother/sister only (Tick the appropriate)	Yes			No.			
	If sibling in the same school,	Sibling Name	1.	2.				
3.	If sibling in the same school, give details of sibling  Name and Address of local Guar	Class - Section	3.	4.				
4.	Name and Address of local Guar  Do you belong to Gen/SC/ST/OB  Gen SC ST	Class - Section rdian (If any) :	3. Child? Attach Cert	4.	SG CHI			
	Name and Address of local Guar  Do you belong to Gen/SC/ST/OB Gen SC ST Child with Special Needs	Class - Section rdian (If any) :	3. Child? Attach Cert	4.	SG CHI			
4.	Name and Address of local Guar  Do you belong to Gen/SC/ST/OB  Gen SC ST	Class - Section rdian (If any) :  BC/EWS/Disabled/S.G.  OBC  Yes  Post Graduation OR	Child? Attach Ceri	4. tificate.	No r. Secondary camination 1	10+2 O	R Scho	
4. 5.	Do you belong to Gen/SC/ST/OE Gen SC ST Child with Special Needs (Enclose authenticated documents)	Class - Section rdian (If any) :  BC/EWS/Disabled/S.G.  OBC  Yes  Post Graduation	3. Child? Attach Ceri	4. tificate.	No r. Secondary	10+2 O	R Scho	
4. 5.	Do you belong to Gen/SC/ST/OE Gen SC ST Child with Special Needs (Enclose authenticated documents) Educational Qualification (Tick highest Qualification only)	Class - Section rdian (If any) :  BC/EWS/Disabled/S.G.  OBC  Yes  Post Graduation OR	Child? Attach Ceri	4. tificate.	No r. Secondary camination 1	10+2 O	R Scho	ol 10th O
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4. 5.	Name and Address of local Guar  Do you belong to Gen/SC/ST/OB Gen SC ST  Child with Special Needs (Enclose authenticated documents) Educational Qualification (Tick highest Qualification only)  (A) Father (B) Mother	Class - Section rdian (If any) :  BC/EWS/Disabled/S.G. OBC  Yes  Post Graduation OR Professional Degree	Graduation OR Equivalent	4. tificate.	No r. Secondary camination 1	10+2 O ent	R Scho Eq	ol 10th O
<ul><li>4.</li><li>5.</li><li>6.</li><li>7.</li></ul>	Name and Address of local Guar  Do you belong to Gen/SC/ST/OB Gen SC ST  Child with Special Needs (Enclose authenticated documents) Educational Qualification (Tick highest Qualification only)  (A) Father (B) Mother Gender	Class - Section rdian (If any) :  BC/EWS/Disabled/S.G. OBC  Yes  Post Graduation OR Professional Degree  Boy  Occupation Code	Graduation OR Equivalent	4. tificate.	No r. Secondary camination 1	10+2 O	R Scho Eq	ol 10th O
4. 5. 6.	Name and Address of local Guar  Do you belong to Gen/SC/ST/OE Gen SC ST  Child with Special Needs (Enclose authenticated documents) Educational Qualification (Tick highest Qualification only)  (A) Father (B) Mother  Gender  Parents Occupation  Father	Class - Section rdian (If any) :  BC/EWS/Disabled/S.G. OBC  Yes  Post Graduation OR Professional Degree  Boy  Occupation Code  Designation	Graduation OR Equivalent	4. tificate.	No r. Secondary kamination 1 Equivale	10+2 O	R Scho Eq	ol 10th O
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