



NIRJA SAHAY DAV PUBLIC SCHOOL

Goshala Complex, Kanke, Ranchi - 06

Managed by DAV College Managing Committee, New Delhi- 55

PHOTO

Registration Form for Admission

Receipt No. :

Date :

Class

To be filled by Office
Registration No.
Admission No.

Date :

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

FILL IN BLOCK LETTERS	Name of the applicant			
	Date of Birth as on 31st March	DD <input type="text"/>	MM <input type="text"/>	YYYY <input type="text"/>
	In word :			
	Aadhaar No. : <input type="text"/>			
	Father's Name			
Mother's Name				
1.	Permanent Address	_____		

	Present Address	_____		

	Ph. No(s) :	Email :		Locality Code (See Locality Code Overleaf)
2.	Sibling Real brother/sister only (Tick the appropriate)	Yes <input type="text"/>	No. <input type="text"/>	
	If sibling in the same school, give details of sibling	Sibling Name	1. <input type="text"/>	2. <input type="text"/>
		Class - Section	3. <input type="text"/>	4. <input type="text"/>
3.	Name and Address of local Guardian (If any) : _____			

4.	Do you belong to Gen/SC/ST/OBC/EWS/Disabled/S.G. Child? Attach Certificate.			
	Gen <input type="text"/>	SC <input type="text"/>	ST <input type="text"/>	OBC <input type="text"/>
	EWS <input type="text"/>	DIS <input type="text"/>	SG CHI <input type="text"/>	
5.	Child with Special Needs (Enclose authenticated documents)	Yes		No
6.	Educational Qualification (Tick highest Qualification only)	Post Graduation OR Professional Degree	Graduation OR Equivalent	Sr. Secondary School Examination 10+2 OR Equivalent
	(A) Father	<input type="text"/>	<input type="text"/>	<input type="text"/>
	(B) Mother	<input type="text"/>	<input type="text"/>	<input type="text"/>
7.	Gender	Boy <input type="text"/>	Girl <input type="text"/>	
8.	Parents Occupation			
	Father (For occupation code, see overleaf)	Occupation Code <input type="text"/>	tick, if Govt. servant <input type="text"/>	
		Designation	<input type="text"/>	
		Organisation Name	<input type="text"/>	
		Organisation /Add.	<input type="text"/>	
	Mother (For occupation code, see overleaf)	Occupation Code <input type="text"/>	tick, if Govt. servant <input type="text"/>	
		Designation	<input type="text"/>	
		Organisation Name	<input type="text"/>	
		Organisation Add.	<input type="text"/>	