

14. Personal Identification (1)
marks of the Pupil (2)

15. a. Whether Vaccinated : Yes / No
b. If yes, date of last vaccination :

16. Blood Group: _____

17. Physical Fitness (handicaps if any) _____
(If so, enclose Medical certificate)

18. Requirement of school transport Yes No Pickup point _____

19. Whether single girl child Yes No

20. Proficiency in Games and sports :
(outstanding achievements)

21. Whether NCC Caded / Boys Scouts/Girl Guide? :

22. Other Extra Curricular Activities :

23. Name of brothers / sisters
studying in this school with class (if any) :

ANNEXURES TO BE ATTACHED

- | | | |
|---|---|--------------------------|
| 1) Birth Certificate (Photo copy) | - | <input type="checkbox"/> |
| 2) Community Certificate (Photo copy) | - | <input type="checkbox"/> |
| 3) Transfer Certificate (Original)
(Other state students–Original TC
with counter sign) | - | <input type="checkbox"/> |
| 4) Grade X Mark Sheet (Original) | - | <input type="checkbox"/> |
| 5) Migration Certificate (Original)
(only for other state students) | - | <input type="checkbox"/> |
| 6) Aadhar Card (Photo copy) | - | <input type="checkbox"/> |

DECLARATION BY THE PARENT / GUARDIAN

I have read and understood the rules and regulations of the school and I hereby undertake that my son / daughter will abide by them. I solemnly declare that the above mentioned particulars about my son / daughter are true and correct to the best of my knowledge and belief.

Station : _____ Date : _____ Signature of Parent or responsible Guardian

FOR OFFICE USE ONLY

Date of Admission..... To Grade Sec..... Admission No.

Financial Clearance C.R. No..... Date..... Account No.

H.M

PRINCIPAL

ACCOUNTANT