



**ANGELS PUBLIC SCHOOL**  
**Vasundhara Enclave Delhi -110096**  
*(Recognized and Affiliated To C.B.S.E Till Senior Secondary)*

**Registration Form Session-2025-26**

Serial No :- .....

Date .....

CLASS APPLIED FOR :- .....

**APPLICANT INFORMATION**

1. Name of Applicant (In Block Letters).....

2. Date of Birth (DD/MM/YYYY) : .....

(In words).....

3. Father's Name (In block letter).....

4. Mother's Name (In block letter).....

5. Residential Address (In block letter) .....

.....

6. Contact No :- Father . ..... Mother ..... Home .....

7. AADHAR Card No of Applicant :- .....

8. AADHAR Card No of Applicants Father :- .....

9. AADHAR Card No of Applicants Mother :- .....

10. Category of Applicant: - General / ST/SC/ OBC/ OTHERS: - .....

11. Applicants Sex :- Male / Female : .....



Passport Size Picture  
Of Applicant

12. Fathers Occupation : ..... Annual Income : .....

13. Mothers Occupation :- ..... Annual Income : .....

15. Fathers Office Address :- .....

Office contact no : .....

16. Mothers Office Address :- .....

Office contact no : .....

17. Is the applicant under CWNS (Children with special needs ) category : Y/ N

If yes please mention details :- .....

18. Is the applicant physically and mentally fit : Y/N

If no please mention details .....

19. Please mention any previous or present medical conditions if any

.....

20 . Please tick distance from School :- (0-5 km) (5-10 km) (10-15 km) (15-20 km)

21. Does applicant have any siblings who is an existing student of the school : Y/N

If Yes please fill the details : Name ..... Class ..... Section .....

Name ..... Class ..... Section .....

Year of Admission : .....

22. Is the applicant a Single Girl Child :- Y/N

23. Is the applicant Son / Daughter of an Alumni of the School : Y/ N

If yes please mention the details: Name of Alumni ..... Year of passing.....

24. Is the applicant Son / Daughter of an existing staff member : Y/N

If yes please mention details : Name ..... Position ..... Date of Joining.....

25. Local Guardian Details: Name..... Address.....

Contact No: .....

26. References if any : Name ..... Address .....  
Contact no .....

**Declaration**

I ..... Father / Mother of ..... seeking admission in your School in class ..... under session **2025-26** , Hereby declare that the above mentioned information is true and correct to my knowledge and that I have not hidden any details regarding my application from school .

Name : ..... Signature ..... Date .....

Note: Kindly enclose the following documents mentioned below:

- Birth certificate of the child (from the Municipality Office).
- SC/ST/OBC Certificate issued by competent Authority (if applicable).
- Copy of Residence Proof of Father, Mother and Applicant : Ration card/ Domicile Certificate/ MTNL Telephone bill/Water bill/Electricity bill/ /Driving License/Passport/ Aadhar card/ Voter I-Card
  
- Proof of Sibling (if applicable): School I-card of the sibling (Photocopy)
- Photocopy of class XII Pass Certificate of the Parent in respect of Alumni.
- A original medical fitness certificate issued lately by MBBS doctor