## **ANGELS PUBLIC SCHOOL**

## **VASUNDHRA ENCLAVE, DELHI - 110096**

Registration Form Session – 2021-22

S.No.		-	
Date			
Registration for class			<b>PHO</b> TOG <b>RAPH</b>
			OF STUDENT
(NOTE: The criteria for admission ha	as been set strictly acco	ording to the	OI STODENT
directions of Directorate of Education			
NOTE :- (Applicants applying for admis selected on basis of entrance examina			
<b>POINT'S CRITERIA FOR SECLECTION</b>	OF APPLICANTS FOR A	<u>DMISSIONS IN CLASS NU</u>	<u>JRSERY</u>
<ul> <li>Guidelines for Admission: E</li> <li>(a) Neighborhood {0-3Km - 50}</li> <li>(b) Sibling already a student of</li> <li>(c) Applicant is a Child of Alum</li> <li>(d) Single Girl Child</li> <li>(e) Applicant is a Staff Child</li> <li>The Points allotted will be s</li> <li>Applicant with higher score</li> </ul>	Points} {3-6Km – 40 school {20 points} nni of School {10 po	Points} {6 & above - ints}  {10points}  {10points}  ate the score of the	
<u>R</u>	<u>EGISTRATIO</u>	N FORM	
1. Name of the Student (In Block	Letters)		
2. Date of Birth:	Date	Month	Year
(In words)			

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

4.	Father's Name (In block letter)									
5.	Mother's Name (In block letter									
6.	Residential address									
	MobMob									
7.	. Office address (If any)									
	MobMob.									
8.	Sex:	Male	Female							
	l									
9.	Category:									
	GEN:	SC:	ST:	OBC:	Other	's:				
10. Class for which admission is sought										
11. Is the School Transportation required? Yes No										
12. Medical information: Does the Child fall under Child With Special Needs Category ?										
If yes, Give Details										
13.	. Is the child physica	ally challenged?	Yes	No						
	If yes, Give Details					······································	•••			
14. Does Applicant have any sibling (Real Brother/Sister only) (Tick the appropriate)  Yes No										
15. Is the sibling in the same school , if yes please provide the following details :-										
Sibling Name										

f our School Alu	mni (Tick the appropria	ate)
Yes	No	
Yes	No	
:		
Yes No		
confirm that the	e above details provide	ed are true and to the best
ny son/daughter	/ward named	for
I s	hall produce the requi	site documents at the
		Signature (Father/Mother)
	Yes  Yes  Yes No confirm that the	Yes No

## (Note: Kindly enclose the following documents mentioned below)

Class-Section.....

- Birth certificate of the child (from the Municipality Office).
- SC/ST/OBC Certificate issued by competent Authority (if applicable).
- Residence Proof: Copy of AADHAR CARD or PASSPORT
- 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 signed by qualified Doctor
- A copy of medical vaccination record
- Photocopies of Aadhar Card Father, Mother or Guardian