



Yuvashakti Model School

An ISO 9001: 2008 Certified
(RECOGNIZED BY DIRECTORATE OF EDUCATION)

BUDH VIHAR, DELHI-110086
PHONE NOS. 011-27536879, 27537889
E-mail Id : ymsinfo2004@yahoo.co.in Website : www.yms.co.in

Application form for Registration/Admission to Class.....

Instructions :

1. Fill the form neatly in BLOCK LETTERS in English only.
2. Fill the form correctly & completely otherwise it will be rejected without intimation.
3. Fill "N.A." where ever not Applicable.

AFFIX LATEST
PASSPORT
SIZE
PHOTOGRAPH
OF CHILD

TELL US ABOUT THE CHILD

1.1 Name :

Surname/Last Name

First Name

Middle Name

1.2 Date of Birth in figures : [Please Attach Original Birth Certificate issued by MCD/Transfer Certificate (TC) of Previous School]

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Date of Birth in Words : _____

1.3 Residential Address : _____

1.4 Place of Birth : _____ Contact Nos. : _____

1.5 Gender : M F Mother Tongue : _____

1.6 Interest in Sports/other Activities/Hobbies (if any) : _____

1.7 Religion : _____ Nationality : _____

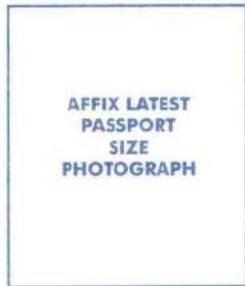
1.8 Do you belong to SC/ST/OBC Yes No (If Yes, Please attach Proof thereof)

1.9 Whether school transport is required, if yes, from where : _____

1.10 Last School Attended : _____

2.1 Who takes care of the child : Parents Guardian
 [A] In case, Parents :

FATHER



MOTHER



- (a) Name : _____
- (b) Age (in yrs) : _____
- (c) Educational Qualification : _____

- (d) Occupation : _____
- (e) Name of Organization/Dept. :-

- (f) Official Address : _____

- (g) Phone Nos. :- Off : _____
Mobile Nos. : _____
- (h) Email Id :- _____
- (i) Monthly Income : Rs. _____

- (a) Name : _____
- (b) Age (in yrs) : _____
- (c) Educational Qualification : _____

- (d) Occupation : _____
- (e) Name of Organization/Dept. :-

- (f) Official Address : _____

- (g) Phone Nos. :- Off : _____
Mobile Nos. : _____
- (h) Email Id :- _____
- (i) Monthly Income : Rs. _____

(j) Whether the parents are Alumini of the school Yes No if Yes, Session _____

(k) No. of real brother(s) & sister (s)

| | Name | Age | Gender | Class | School/College/Service/Orgn. |
|-----|-------|-------|--------|-------|------------------------------|
| (1) | _____ | _____ | _____ | _____ | _____ |
| (2) | _____ | _____ | _____ | _____ | _____ |
| (3) | _____ | _____ | _____ | _____ | _____ |

2.2 We want our child to be admitted in this school because : _____

2.3 We came to know about your school from : _____

DECLARATION BY PARENTS

Certified that the information supplied by me is correct :

I understand that the application form for registration is no guarantee for admission & decision of Admission Committee of the school what so ever will be final & binding on us.

Date : _____

Signature of Parents/Guardian

FOR OFFICE USE ONLY

Registration No. : _____ Admission No. : _____

Admitted in Class : _____ Adm. Receipt No. : _____

Verified by

Admission In-charge

Cashier

Principal

ADMISSION AND WITHDRAWAL DEPARTMENT

Certified that all entries have been made in the Admission Register after verification and the candidate is assigned Admission No. _____. The name has been entered in the register of Class _____ Section _____ group _____ and other required information filled in at the place/s in it.

Admission Confirmed

Admission Incharge

Principal

Date : _____