



S.B.D. HIGHER SECONDARY SCHOOL

Co. Educational English Medium School
Nurturing Creativity and Excellence

Registration Form

INFORMATION OF CHILD (IN BLOCK LETTER)

Full name	<input type="text"/>																												
Father's full name	<input type="text"/>																												
Mother's full name	<input type="text"/>																												
Date of Birth	<input type="text"/>							Sex	<input type="text"/>			Religion	<input type="text"/>																
Class for which Admission is sought	<input type="text"/>					Cast	<input type="text"/>																						
Local Address	<input type="text"/>																												
Permanent Address	<input type="text"/>																												
Emergency Contact No.	<input type="text"/>										Mobile No.	<input type="text"/>																	
Aadhaar No.	<input type="text"/>																												
Name of Last school	<input type="text"/>																												

DECLARATION

I/WE hereby certify that all the information given in the Registration form is complete and accurate. I /WE understand and agree that falsification or omission of facts will justify the refusal of admission or dismissal. WE have read and do hereby consent to the Terms and conditions being enclosed with the Registration form.

 Signature of Father/ Guardian

 Signature of Mother / Guardian

BROTHERS / SISTERS (If any one studying in school)

Name	Age	Institution	Class	Adm. No.

CONVEYANCE (put a tick [✓]).

YES	<input type="checkbox"/>
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For Office Use Only (Put A Tick ✓)

✓	CHECK LIST
<input type="checkbox"/>	Registration form
<input type="checkbox"/>	Birth certificate / Transfer certificate
<input type="checkbox"/>	Copy of original marksheet of last exam.
<input type="checkbox"/>	Photocopy of student Aadhaar card
<input type="checkbox"/>	Parents ID Proof & Photocopy