



ADMISSION NO. ....

# M. M. Public School

VASUDHA ENCLAVE, PITAM PURA, DELHI-110034

Application form for Registration/Admission to

Class .....

## Tell us about the child

- 1.1 Name : \_\_\_\_\_
- 1.2 (i) Date of Birth in figures : \_\_\_\_\_  
Day Month Year
- (ii) Date of Birth in words: \_\_\_\_\_
- 1.3 Residential Address: \_\_\_\_\_  
\_\_\_\_\_
- Landline No. : \_\_\_\_\_ Mobile No.: \_\_\_\_\_
- 1.4 Permanent Address: \_\_\_\_\_  
\_\_\_\_\_
- Landline No. : \_\_\_\_\_ Mobile No.: \_\_\_\_\_
- 1.5 Sex: Male/Female : 1.6 First Child : (Yes/No), if Yes, attach proof thereof 1.7 Blood Group: \_\_\_\_\_
- 1.8 Mother Tongue: \_\_\_\_\_ 1.9 Last School Attended: \_\_\_\_\_
- 1.10 Last Class attended : \_\_\_\_\_ if X, then  
(i) Board appeared : \_\_\_\_\_  
(ii) Roll No. of X : \_\_\_\_\_ (iii) Year of Passing : \_\_\_\_\_
- 1.11 Interest in sports / other activities / hobbies (if any) : \_\_\_\_\_  
\_\_\_\_\_
- 1.12 Nationality : \_\_\_\_\_ Religion : \_\_\_\_\_
- 1.13 Do you belong to SC/ST/OBC : Yes/No (If yes, supply proof thereof)
- 1.14 Whether school transport is required, if yes, from where : \_\_\_\_\_  
\_\_\_\_\_
- 1.15 Any Disability / Medical Problem : \_\_\_\_\_
- 1.16 Aadhar Card No. : \_\_\_\_\_

Please affix  
passport size  
photograph of the  
child

## Tell us about Yourself (Parents)

2.1 Who takes care of the child : Parents / Guardian

[A] In case, parents:

FATHER

Please affix  
passport size  
photograph  
of Father

MOTHER

Please affix  
passport size  
photograph  
of Mother

- |   |   |
|---|---|
| (a) Name : _____                          | (a) Name : _____                          |
| (b) Age : _____ Years                     | (b) Age : _____ Years                     |
| (c) Educational Qualification : _____     | (c) Educational Qualification : _____     |
| (d) Profession / Occupation: Pvt. / Govt. | (d) Profession / Occupation: Pvt. / Govt. |
| (e) Designation : _____                   | (e) Designation : _____                   |
| (f) E-mail id : _____                     | (f) E-mail id : _____                     |
| (g) Name of Organisation / Deptt. : _____ | (g) Name of Organisation / Deptt. : _____ |

<p>(h) Official Address : _____ _____</p> <p>Phone Numbers : _____</p> <p>(i) If in business, Nature of Business : _____ _____</p> <p>(j) Monthly Income: Rs. _____</p> <p>(k) School Alumni : _____ Year of Passing : _____ ( Attach proof)</p>	<p>(h) Official Address : _____ _____</p> <p>Phone Numbers : _____</p> <p>(i) If in business, Nature of Business: _____ _____</p> <p>(j) Monthly Income: Rs. _____</p> <p>(k) School Alumni : _____ Year of Passing : _____ ( Attach proof)</p>
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**(B) In case of Guardian:**

<p>a) Name: _____</p> <p>b) Address : _____</p> <p>c) Mobile No. : _____ E-mail id: _____</p> <p>d) Age : _____ Years (e) Aadhar Card No: _____</p> <p>f) Relation with Parents: _____</p> <p>g) Any other Information: _____</p>	<p>Please affix latest passport size photograph of guardian</p>
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**MISCELLANEOUS INFORMATION**

3.1 Whether the family is joint : \_\_\_\_\_ Yes / No

3.2 No. of real brother(s) & sister(s) : \_\_\_\_\_

Name	Age	Sex	Class	School/Col./Service/Orgn.
(1) _____	_____	_____	_____	_____
(2) _____	_____	_____	_____	_____

3.3 We want our child to be a admitted in this school because:  
\_\_\_\_\_

3.4 We came to know about your school from:  
\_\_\_\_\_

3.5 Documents attached in support of date of birth: \_\_\_\_\_  
\_\_\_\_\_

3.6 Who will come to pick the child from the school in case school transport is not used?

i) Parent(s) / guardian(s) \_\_\_\_\_

ii) Third person \_\_\_\_\_

**(If Third Person)**

Please affix latest passport size photograph

**DECLARATION BY PARENTS**

- i) Certified that the information supplied by me is correct.
- ii) I have gone through the website / prospectus & agree to abide by the rules & regulations of the school.
- iii) I understand that the application form for registration is no guarantee for admission & decision of admission committee of the school whatsoever will be final & binding on us.
- iv) No refund will be made after the confirmation of admission.

**Date :** \_\_\_\_\_

**Signature of Parents/Guardian**

**FOR OFFICE USE ONLY**

Registration No.: \_\_\_\_\_

Admission No. : \_\_\_\_\_

Admitted in Class: \_\_\_\_\_

Ad. Receipt No. : \_\_\_\_\_

Admission Incharge

Cashier

Principal