Vidya Public School

SINGHARIA, GORAKHPUR

Contact No: 860 100 3007 E-mail Id: vidyapublicschoolgkp@gmail.com

APPLICATION FOR ADMISSION

OFFICE USE ONLY:
Date of admission: [ ][ ][ ][ ][ ][ ][ ][ ]
Registration no. allotted : _____
Class allotted : _____

paste Student Passport Size photo here

1. Student Name: [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]
[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

Gender: (Tick (√) the correct) Male [ ] Female [ ]

2. Date of Birth: D D M M Y YYY

[ ][ ][ ][ ][ ][ ][ ][ ]

In Word:_____
_____

3.Nationality: _____ **4. Religion:** _____

5. Aadhar No.:_____ **6. Blood Group:**_____ **7. Height:**_____ **8.Weight:**_____

9. Caste: GEN[ ] SC[ ] OBC[ ] ST[ ] (Please mark(√) tick in the appropriate box)10.Sub Caste:_____

11.Father's Name:

[ ]

12. Father's Qualification: _____ **13. Occupation:** _____

14. Contact No. (Personal) _____ **Office :** _____

15. Mother's Name:

[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

16. Mother's Qualification: _____ **17. Occupation:** _____

18. Contact No. (Personal) _____ **Office :** _____

19. Guardian's Name:

[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

20. Guardian's Relation with Student: _____

21.Guardian's Contact No. (Personal) _____ **Office :** _____

22.Mobile No formessege.

[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ] **23.whatsapp no.:**_____

24..facebook Id: _____ **25. Email Id:**_____

26. PermanentAddress:

House No. -	
Mohalla/Colony	
Vill / Post -	
District.-	
State-	**Pin code -**

27. Present Address:

House No. -	
Mohalla/Colony	
Post -	
Dist.-	**Pin code -**

28. Last school attended:

a- School Name:_____

b- School Address:_____

29. Brother/Sister Detail:

Name: _____ **Age:** _____ **Class:** _____

School: _____

Name: _____ **Age:** _____ **Class:** _____

School: _____

30.Bank Detail: **a- Bank Name:**_____ **b- Account No.:**_____

c- Branch Name:_____ **d- IFSC Code :**_____

Note:-I here declare that the particulars furnished above are true to the best of my knowledge and belief in the information is found to be false or incorrect; I understand that my candidate will be cancelled.

Date: _____ **Place:** _____

Signature of Student	**Signature of Parents/Guardian**

FOR OFFICE USE ONLY

Check list:

From filled duly: _____

Photograph Pasted: _____

Parents Sign : _____

Birth Certificate Deposited: _____

Attached forms filled duly: _____

(Signature of authority)

Principal
(sign & seal)