



011-27650347, 9773929899

School Id: 1309191
School Code: 85071
Affiliation No: 2730299

SANT NIRANKARI PUBLIC SCHOOL
(Affiliated to C.B.S.E Upto Senior Secondary School)
Sant Nirankari Colony, Delhi-110009
Email : snpsnc@snps.edu.in, Visit us at : snps.edu.in

ADMISSION FORM

For Office Use Only

Form No.: 001

Admission No _____	D O A _____	EWS	DG	General
Admitted to Class & Sec -----				

Birth Certificate	School Leaving Certificate	Residence Proof	Aadhaar Card of Student and Parents	Caste Certificate	Report Card of Previous Class	Medical Certificate & Blood Group Certificate

Entrance Test Marks (if applicable)					
Eng	Hindi	Maths	Sst	Sci	Total

Any other Remarks _____	Student's Photo

NOTE: ALL THE INFORMATION SHOULD BE IN BLOCK LETTERS AND NO CUTTING WILL BE ACCEPTED.**STUDENT INFORMATION _****ADMISSION IN CLASS _____**

NAME _____

AADHAAR NO _____

DATE OF BIRTH (IN NUMERIC) _____

DATE _____, MONTH _____, YEAR _____

DATE OF BIRTH (IN WORDS) _____

AGE AS ON 31 MARCH 20_

YEAR _____, MONTH _____, DAYS _____

GENDER

MALE _____ FEMALE _____ ANY OTHER _____

RESIDENTIAL ADDRESS _____

PERMANENT ADDRESS _____

DISTANCE FROM SCHOOL (KM) _____

_____, BLOOD GROUP _____

CATEGORY (OBC/SC/ST/GENERAL/OTHERS) _____

NATIONALITY _____

RELIGION _____

MOTHER TONGUE _____

NAME OF PREVIOUS SCHOOL _____

LAST SCHOOL AFFILIATED TO (CBSE /STATE BOARD /ANY OTHER)_____

DETAIL OF SIBLINGS: Studying in SNPS (Yes/No): (if yes fill the details)

NAME	BROTHER / SISTER	ADM NO	CLASS & SEC

PARENT ALUMNI NAME & CLASS _____

MEDICAL CONDITION (IF ANY) _____

DISABILITY (IF YES), MENTION DETAILS _____

SINGLE GIRL CHILD _____

SCHOOL LEAVING CERTIFICATE NO:-_____, DATE OF ISSUE: _____

DETAILS OF PARENTS

PARTICULARS	FATHER'S DETAIL	MOTHER'S DETAIL
NAME		
MOBILE NO		
AADHAAR NUMBER		
EMAIL ID		
QUALIFICATION		
OCCUPATION		
ANNUAL INCOME		
OFFICE ADDRESS		
TELEPHONE NO.(OFFICE)		
PHOTO (GUARDIAN)	PHOTO (FATHER)	PHOTO (MOTHER)

TRANSPORT INFORMATION:

Transport facility from school YES/ NO. If yes kindly choose the closest stop_____

DECLARATION BY PARENTS

I hereby declare that:

- 1) The above information including Name of the Candidate, Father's/ Guardian's Name, Mother's Name and Date of Birth furnished by me is correct to the best of my knowledge & belief.
- 2) I will not request for the changes in above in future, if admitted.
- 3) I shall abide by rules of the School.

Name (Mother) _____

Name (Father) _____

Date _____

Signature _____

Signature _____

Place _____

Correct entries from the Admission Forms to Admission and withdrawal Register have been made on Page no.....on dated.....

Name & Signature _____

(Front Desk)

Name, Signature & Amount _____

(Fee Counter)

Signature of the
Principal/HOS

- In case, Student is from other board, Transfer Certificate should be countersigned by the competent Authority.