



# DELHI PUBLIC SCHOOL KALINGA

Affiliation No. 1530078

Website : www.dpskalinga.edu.in,

Email : info@dpskalinga.edu.in

Form No. : K/ /.....

**For office use only**

Reg.No.:K/ /.....

Date :.....

Receipt No.....

## REGISTRATION FORM

**Classes Nursery - XI**

(Issue of Registration Form does not imply admission)

Please register the name of my Son/Daughter / ward for admission to your school.

1. Admission sought to : Class..... Session : 20 - 20 -

2. Child's Name (Block Letters) :.....

3. Date of birth (in figures and in words) : .....

Age, as on 1<sup>st</sup> April' \_\_\_ : Years ..... Months..... Days.....

**The child should be 3+ years of age as on 30<sup>th</sup> September, 20\_\_\_ for Nursery.**

4. Nationality of Child..... Religion :.....

Mother Tongue :..... Home Town: ..... Whether SC/ST/OBC/GEN .....

Aadhaar Number :.....

5. Father's Name (Block Letters) :.....

Academic Qualification :.....

Occupation :..... Designation .....

Office Name & Address :.....

Phone No. :(O).....(R).....(Mob).....

Email ID : .....

Aadhaar Number :.....

6. Mother's Name (Block Letters) :.....

Academic Qualification :.....

Occupation :..... Designation.....

Office Name & Address :.....

Phone No. :(O).....(R).....(Mob).....

Email ID : .....

Aadhaar Number :.....

7. Guardian's Name (Block Letters) :.....

Occupation :..... Designation.....

Relationship with child :.....

Office Name & Address :.....

Phone No. :(O).....(R).....(Mob).....

Email ID : .....

Aadhaar Number :.....

8. Address (Present) :.....

(Permanent)

Pin.....

Pin.....

Ph. : ..... Mob : .....





