

## INDIAN CONVENT SCHOOL Sr.Sec. (Affiliated to CBSE)

POCKET-3, SECTOR-24, ROHINI, DELHI-110085

Phone: 27041061, 8178197958 E-mail: indianconventschool@yahoo.com

| Registration NoClass to which admission                                      | n sought:                              | To be filled by officeSession | Photo<br>With<br>Date |  |  |  |  |  |
|--|--|-------------------------------|-----------------------|--|--|--|--|--|
| PERSONAL DETAILS  1. Name:  2. Gender: Male   3. D. O. B. Date               | Female Any Month Year                  | other                         |                       |  |  |  |  |  |
| In words(Attach Date of Birth Certificate issued by the Competent Authority) |  |                               |                       |  |  |  |  |  |
| 4. Details of parent   | ts: -                                  |                               |                       |  |  |  |  |  |
| Details  | Mother                                 | Fathe                         | er/Guardian           |  |  |  |  |  |
| Name   |  |                               |                       |  |  |  |  |  |
| Educational Qualification Residential Address (with pin code) E-mail         |  |                               |                       |  |  |  |  |  |
| Occupation   |  |                               |                       |  |  |  |  |  |
| Official Address   |  |                               |                       |  |  |  |  |  |
| Annual Income  |  |                               |                       |  |  |  |  |  |
| Contact No.  |  |                               |                       |  |  |  |  |  |
|  | l: Yes<br>Divyangjan): Yes<br>EWS: Yes |                               | ] EWS []              |  |  |  |  |  |
|  | INDIAN CONVE                           | NT SCHOOL                     |                       |  |  |  |  |  |
| Registration No  |  |                               |                       |  |  |  |  |  |
| Name:  | Name:                                  |                               |                       |  |  |  |  |  |
| Parent's Name  |  |                               |                       |  |  |  |  |  |
| Reg. Fee: Rs. 25/  | Reg. Fee: Rs. 25/-                     |                               |                       |  |  |  |  |  |

**Authorized Signatory** 

| 8. Name & Addres   | Name & Address of the last attended school |                |                         |         |            |                    |  |  |  |  |
|--|--|----------------|-------------------------|---------|------------|--------------------|--|--|--|--|
| 9. Class Last attended   |  |                |                         |         |            |                    |  |  |  |  |
| 10. Last School affiliated is  |  |                |                         |         |            |                    |  |  |  |  |
| (i) CBSE   | (i) CBSE (ii) ISCE (iii) IB                |                |                         |         |            |                    |  |  |  |  |
| (iv) State Board (v) any other (please specify)  |  |                |                         |         |            |                    |  |  |  |  |
| 11. Result of last Class   |  |                |                         |         |            |                    |  |  |  |  |
| Subject  | Maximum                                    | Marks          | Marks                   | btained | % of Marks | Remarks            |  |  |  |  |
|  |  |                |                         |         |            |                    |  |  |  |  |
|  |  |                |                         |         |            |                    |  |  |  |  |
|  |  |                |                         |         |            |                    |  |  |  |  |
|  |  |                |                         |         |            |                    |  |  |  |  |
|  |  |                |                         |         |            |                    |  |  |  |  |
|  |  |                |                         |         |            |                    |  |  |  |  |
| 12. Transfer Certificate Details*:-  |  |                |                         |         |            |                    |  |  |  |  |
| Transfer Certificate No:   |  |                |                         |         |            |                    |  |  |  |  |
| Date of Issue:   |  |                |                         |         |            |                    |  |  |  |  |
| * In case, student is from other board, Transfer Certificate should be countersigned by the Competent Authority.  13. Details of siblings (if any)   |  |                |                         |         |            |                    |  |  |  |  |
| Name   |  | Brother/Sister |                         | Age     | School stu | School studying in |  |  |  |  |
|  |  |                |                         |         |            |                    |  |  |  |  |
| 14. Single Parent Yes No   |  |                |                         |         |            |                    |  |  |  |  |
|  |  |                |                         |         |            |                    |  |  |  |  |
| <u>DELCLARATION</u> I hereby declare that 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. I shall abide by the rules of the School. |  |                |                         |         |            |                    |  |  |  |  |
| Date   |  |                |                         |         |            |                    |  |  |  |  |
| Place  |  |                | Relation with candidate |         |            |                    |  |  |  |  |
|  |  |                |                         |         |            |                    |  |  |  |  |

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