

ANUPAM SHIKSHA NIKETAN SR. SEC. SCHOOL



KUTAIL (KARNAL)

ADMISSION FORM

Registration No. : _____

Academic Year : _____

Name of Pupil : _____

Date of Birth : Day Month Year

Sex : Male Female

Admission sought in : NUR. LKG UKG

1st IIrd IIIrd

IV V VI

VII VIII IX

X XI XII.....

Father's Name : _____

Mother's Name : _____

Occupation : Father's _____ Mother's _____

Category : _____

Residential Address : _____

Residential Tel. No. : _____

Additional Nos. : Father's (Office) _____ Mobile _____

Mother's (Office) _____ Mobile _____

Transport Requirement : Yes No

Previous Schooling : _____

Subject : _____

Documents Attached

School Leaving Certificate

Character Certificate

Birth Certificate

Aadhar Card

Income Certificate

Ration Card

Candidate Signature _____

Date : _____

Signature of Parent/Guardian

Signature of Principal