



N.C.A. Sr. Sec. School

Affiliated to C.B.S.E., New Delhi
12 MD, New Gharsana (Sri Ganganagar)

Admission No. _____ Class _____ Section _____

Application Form For Admission

The Principal
N.C.A. Sr. Sec. School
12MD, New Gharsana- Distt. Sri Ganganagar

Dear Sir/Madam

I request for admission of my Son/Daughter/Ward to class _____ of
your school with effect from _____ I agree to abide by the
rules and regulation of the school, if he/she is selected for admission. The particulars are given below :-

Affix a
passport size
photograph

A. Student Information

Name First

Middle

Last

2. Date of Birth

D D M M Y Y Y Y

3. Category

In Words _____

4. Nationality _____

5. Religion _____ 6. Mother Tongue _____

7. Name of School Last Attended _____

School's Address _____

Class in the previous school _____ Medium of Instruction _____

8. Details of Brother (S) or Relative (S) in N.C.A. Sr. Sec. School, New Gharsana if any,

	Name	Class & Section	Adm. No.	Relation
1.	<table border="1" style="width: 150px; height: 15px;"></table>	<table border="1" style="width: 100px; height: 15px;"></table>	<table border="1" style="width: 100px; height: 15px;"></table>	<table border="1" style="width: 100px; height: 15px;"></table>
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9. Name of local Guardian (if any) _____ Relation _____ Ph. No. _____

10. Person to contact in emergency _____ Ph. No. _____ Mob. : _____

11. Name of person authorised to pick up child from school _____ Relation _____

12. Whether school transport is required _____ (Yes/No)

B. Parent's/Guardian's Information

Father's Name

Occupation (Business/Govt. Employee/Private/Others) _____

Qualification _____ Annual Income _____

Official Address _____ Ph. No. _____ Mob. : _____

Mother's Name

Occupation (Business/Govt. Employee/Private/Others) _____

Qualification _____ Annual Income _____

Official Address _____ Ph. No. _____ Mob. : _____

C. Correspondence :-

Residential Address _____

District _____ State _____ Pin Code _____
Tel No. _____ (O) _____ (R) _____
Mobile _____ E-Mail _____

DECLARATION BY PARENTS

I hereby declare that all the informations given above is authentic to the best of my knowledge and if it is found to be incorrect.

it will lead to cancellation of Registratio/ Admission of my ward from the school. I also agree that the decision of the school authorities will be final final and binding on me in all matters.

Date _____

Signature: _____
(Mother)

Signature: _____
(Father)

Subject :-

(1) _____ (2) _____
(3) _____ (4) _____
(5) _____ (6) _____

N.B. : This form will not be accepted without the following Certificates :-

1. Date of Birth Certificate.
2. Transfer Certificate/School Leaving Certificate, if necessary
3. Attested copy of Progress Report of previous Class, if necessary.
4. Passport size Photograph.
5. Character Certificate (for admission in classes in classes IX onwards only.

FOR OFFICE USE ONLY

Total Amount _____

Receipt No. _____

Dated _____

Fee Clerk

CHECKEDBY

DATE: _____

PRINCIPAL