



S.G.S. PUBLIC SCHOOL RAUN

# SHINING GLORIOUS SCHOLARS' PUBLIC SCHOOL

Raun, Bhind (M.P.) – 477335

## REGISTRATION FORM

Photo

SESSION : 20 ..... - .....

Reg. No. .... CLASS IN WHICH ADMISSION IS SOUGHT .....

### PARTICULARS OF THE STUDENT

Name of the Student

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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(In Block Letters)

विद्यार्थी का नाम (हिन्दी में) .....

Sex (Male / Female) ..... Caste / Category (SC / ST / OBC / GEN) : .....

Date of Birth :

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In Words : .....

Age as on 1<sup>st</sup> April 20 ..... :

Place of Birth : .....

Languages Known: 1. .... 2. .... 3. ....

Present Address : .....

Permanent Address : .....

Contact No. (Father)

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Contact No. (Father)

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E – mail ID : .....

Single Child : .....

SSSM ID of Student : .....

SSSM ID of Family : .....

Aadhar Card No. :

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Bank A/c No. : .....

IFSC CODE : ..... Bank &amp; Branch Name : .....

Blood Group : ..... Vision : Left ..... Right .....

### PARTICULARS OF THE PARENTS

Father's Name

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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(In Block Letters)

पिता का नाम (हिन्दी में) .....

Address : .....

Qualification : ..... Occupation : ..... Annual Income .....

E – mail Id : ..... Contact No. : .....

Aadhar Card No. :

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Bank A/c No. : .....

IFSC CODE : ..... Bank &amp; Branch Name : .....

Mother's Name

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(In Block Letters)

माता का नाम (हिन्दी में) .....

Qualification ..... Occupation : ..... Annual Income : .....

E – mail Id : ..... Contact No. .....

**PARTICULARS OF THE REAL BROTHERS / SISTERS OF THE STUDENT**

| <i>NAME</i> | <i>CLASS</i> | <i>NAME OF THE SCHOOL</i> |
|-------------|--------------|---------------------------|
|             |              |                           |
|             |              |                           |
|             |              |                           |
|             |              |                           |

*Name of the previous school : ..... City : .....*

*Class : ..... Result : ..... Roll No. : ..... Percentage : ..... Grade : .....*

*Class in which admission is sought .....*

*For XI & XII (PCM / PCB / Commerce ..... Physical Education / Computer Science. / Hindi*

*..... Additional Subject .....*

*As Parents Your Aspiration from your child : .....*

*Your Expectation from School & Teacher with respect to your child : .....*

*Hobbies / Area of Interest ..... Sports / Games : .....*

*Specify illness / Allergy (if any) .....*

*Name of the Family Doctor ..... Mobile No. ....*

*I ..... hereby confirm that the above mentioned information is correct as per the best of my knowledge and if it is found incorrect, the admission sought will be treated as cancelled and no refund will be given.*

\_\_\_\_\_  
*Student's Signature*

\_\_\_\_\_  
*Parent's Signature*

***Needed Documents:***

- |   |   |
|---|---|
| (1) Transfer Certificate (Original with Counter Sign)           | (2) Mark sheets of Last 2 Years (Photocopy) |
| (3) Passport size Colour Photograph of Student (4 pcs)          | (4) Birth Certificate (Photocopy)           |
| (5) Student Account No. with IFSC Code (Passbook Photo Copy)    | (6) Students Aadhar Card (Photo Copy)       |
| (7) SSSM ID No. of the Student with Family SSSM ID No.          | (8) Health Form                             |
| (9) Address Proof of Parents (Photo Copy)                       | (10) ID Proof of Parents (Photo Copy)       |
| (11) Ration Card (Photo Copy)                                   | (12) Father's Aadhar Card (Photo Copy)      |
| (13) Passport size Colour Photograph of Father & Mother (2 pcs) | (14) Income Certificate                     |
| (15) Parents' Account No. with IFSC Code (Passbook Photo Copy)  | (16) Caste Certificate (For SC, ST, OBC)    |
| (17) Bonafide certificate for Pre-Primary classes               |   |

***Note : Without these documents admission will not be considered.***

**FOR OFFICE USE ONLY**

**Orders on the basis of the documents enclosed / on the basis of the test report, the admission in class ..... is granted / not granted. Fee may be realized.**

**Date .....**

**Realized fee as scheduled and the student is admitted. His / her Admission No. is .....**

**Dated .....**

\_\_\_\_\_  
**Accountant**

\_\_\_\_\_  
**Principal**