

CHUNI LAL SACHDEVA

D.A.V. CENTENARY PUBLIC SCHOOL

	(Under the Direct Control of D.A.V.College Managing Committee, New Delhi) AFFILIATED TO C.B.S.E. DELHI				For Office Use Only Admission No.					
	Bathinda Road , Jaitu Ph.01635-510427 REGISTRATION CUM ADMISSION FORM									
S. No	REGIST RATION COM ADMISSION FORM Registration does not Guarantee Admission					Date of	f Adm	ission		
For Enrolment in Class			Session							
Please affix latest passport size photograph in colour STUDENT Do not staple		Please affix latest passport size photograph in colour MOTHER			Please affix latest passport size photograph in colour FATHER/GUARDIAN					
NAME OF SCHOLAD	(in Plack Lattons)	0	Signature of Mother Signa			ture of Father/Guardian				
NAME OF SCHOLAR										
Sex M/F(tick the cor	rrect option) M ·	- 🗌 F	-							
MOTHER 'S NAME (in										
										\top
FATHER 'S NAME (in	Block Letters) :									
GUARDIAN 'S NAME	(in Block Letters)									
RELATION OF GUAR	DIAN WITH THE	SCHOLAR								
Gen So Category	C ST OBC		AADHAR	CARD NUM	BER					1
(✔)					·					
SCHOLAR 'S DATE OF BI D D	TH M M Y	Y	Y Y							
BANK ACCOUNT DE	TAUS		 	 FSIDENT	IAL/COF	PESDO	NDFN		UDBE	22
					•					
	k Account Passboo						•••••	•••••		
							•••••			
✤ Branch Name :										
✤ Account No. :										
EDUCATIONAL BACI	KGROUND									
Name of previous school a	attended (Full Address	5)								
From ClassT										
Has the child ever been Ex	xplained/Rusticated/N	lot promote	ed to next cl	ass by any	school?	Yes	No]	
PROFESSION/OCCUI	PATION									
Father's/Guardian's Pro	ofession/Occupation_				Qualific	ation				
, Designation										
Office Address	_									
Telephone				E-mail						
Mother's profession/Oc	cupation			_Qualifica	tion					
Designation	Organis	ation			Monthly	income				
Office Address										
Telephone	Mobile			E-mail						

Real Brother/Sister Studying in the School

Name	Class & Reaction	Admission No	
Documents to be attached:-			
Date of Birth Certificate(Attested Photocopy)		Attested Photostat copy of aadhar card	
Attested Photostat copy of previous year's res	ult card	Two Passport size photograph.	
Original Transfer Certificate from the Previous	s School	Migration Certificate (if applicable)	
SC/BC/OBC Certificate (if applicable)			

DECLARATION :

- 1) I have thoroughly checked all the particular as above filled in the registration form of my ward. If any mistake in candidate's name/father's name/mother's name/D.O.B etc. in student's credential is detected after wards, I will solemnly responsible for the same.
- 2) I/we declare that I/we have understand the rules and regulations of the school that fees once paid is not refundable and I will not claim the refund of fees.
- 3) I/we certify that the information furnished in this form is true to best of my knowledge and belief. I understand that the registration of my child/ward is no guarantee of admission to the school and shall be subject to the term and conditions laid down by the management.

VERIFICATION BY TH	E ADMISSION COMMITTEE
Form verified and checked by	Name
	Designation
Signature	
Recommended by Admission Incharge	Signature
Principal's Remarks	
Principal Signature	
	FICE USE ONLY
Registration fee received Rs	Receipt NoDate
Admission fee received Rs	Receipt NoDate
Admitted to Class	Section Alloted