

SOHAN RAI PUBLIC SCHOOL

(Govt. Recognised)

School Id No. 1924222



(Govt. Recognised)

Chhatarpur Extn., New Delhi-10074

Tel.: 9266326310, 9868035973, 8826515152, 9971371781

E-mail: infosrps@gmail.com

Web.: www.sohanraipublicschool.org

Education gives you wings to fly

FATHER'S
PHOTOGRAPH

MOTHER'S
PHOTOGRAPH

STUDENT
PHOTOGRAPH

No. **2004**

Session

ADMISSION FORM FOR CLASS ADMISSION NO.

Name of Student :

Gender : Nationality Blood Group

Religion of Student : Category : OBC ☐ ST ☐ SC ☐ GEN ☐ EWS ☐

Date of Birth :

DD	MM	YY

 Age as on 31st March 20.....

YY	MM

Student's Aadhar No. :

Residence Address :

Contact No. : E-mail

Father's Name : Occupation

Office Address :

Mobile No. :

Mother's Name : Occupation

Office Address :

Mobile No. :

Detail of the school last attended

School Name :

Class passed Medium Marks obtained

Sibling studying in school

1

2

3

:

Medical History (if any)

Behavioural problem (if any)

:

Transport Required

From To

.....
Sign. of Guardian

.....
Sign. of Father

.....
Sign. of Mother

AFFIDAVIT

I Son/Daughter/Wife of Sh.

Resident of

solemnly declare that the date of birth of my Son/Daughter (Namely)

Student of Class is (In words)

This statement is according to the best of my knowledge. I also declare that in future

I will not demand for any Change in his/her date of birth.

For Office use only

Admission to Class

Condition applied (if any)

Dated

.....
Principal

Enclosed :

- D.O.B. Certificate
- Copy of Category (SC/ST/OBC) Certificate
- 2 Photographs of Student
- Adhaar ID Proof of Student
- Medical Certificate (if any)
- 2 Photographs of Parents
- Adhaar ID Proof of Parents
- Transfer Certificate / Leaving Certificate