

Registration Form

224748, 220629, 220630



D.A.V. PUBLIC SR. SEC. SCHOOL

RAJPURA-140 401

Under the direct control of D.A.V. College Managing Committee, New Delhi

Affiliated to C.B.S.E. New Delhi

Application for Registration to.....Class for 20.....admissions.

The Principal,
D.A.V. PUBLIC SR. SEC. SCHOOL
Rajpura.

Sir/Madam,

I request you to kindly register the name of my ward for admission to.....class. The desired Registration Fee has been paid vide receipt No.....dated.....

The necessary particulars are given below :

1. Name of the child.....
2. Male/Female.....
3. Date of birth.....
4. Present age.....
5. a) Name of the School, If studying at present.....
b) Class in which studying there.....
6. Father's Name.....
7. Occupation of the father.....
8. Home address.....
9. Telephone No. if any, Office.....Residence.....
10. Your relationship with the child.....

I have noted that the Registration Fee is non-refundable.

The decision of the school authorities regarding the admission of my child will be binding on me.

I shall follow the rules and regulations of the school for all purposes.

Thanking you,

Yours faithfully,

Dated :

Signature
With address for Correspondence